

# Workplace 'resilience' programs might not make any difference

December 18 2018

---

Workplace resilience programmes, designed to bolster mental health and wellbeing, and encourage employees to seek help when issues arise, might not make any difference, suggests research published online in *Occupational & Environmental Medicine*.

These programmes are becoming increasingly popular in the belief that they are not only good for employee mental [health](#), but also for employers' overheads, despite relatively little sound evaluation of their effectiveness, say the researchers.

In a bid to address this, they compared the impact of a resilience-based programme, called SPEAR (358 participants), with standard [training](#) (349) in 707 new military recruits.

SPEAR has been specifically developed for the UK Royal Air Force (RAF) and focuses on key activities: participating in Social networks; capitalising on Personal strengths and weaknesses; managing Emotions; enhancing Awareness of psychological symptoms; and learning techniques to promote Resilience.

The researchers wanted to know if SPEAR improved recruits' mental health and wellbeing as well as their attitudes to [mental illness](#) during the initial stages of their military career. They also wanted to know if SPEAR affected perceptions of leadership, unit cohesion, and willingness to seek help for mental health and alcohol issues.

The recruits didn't know which group they had been assigned to, but all of them were formally assessed for post-[traumatic stress disorder](#), common mental health symptoms, hazardous drinking, homesickness, and mental health stigmatisation before their training began.

These assessments were then repeated after the programmes had completed (9 weeks), and 3 months later.

After they had finished their training, the recruits were asked to rate it, and to give their impressions of their leaders and the cohesiveness of their unit. Their feedback was sought again after 3 months.

Some 44 recruits left the service before the 9 weeks were up. And of the remainder, 655 completed their assessments afterwards, and 481 did so 3 months later.

There was no evidence that SPEAR made any difference to recruits' mental health and wellbeing: their attitudes to mental illness and willingness to seek help for mental health or [alcohol problems](#): or their perceptions of military leaders and their unit's cohesion, when compared with standard training.

Alcohol consumption patterns remained unchanged despite the SPEAR programme including a component focusing specifically on substance and alcohol misuse. The SPEAR recruits also seemed to feel more stigmatised after they had completed their training, the responses indicated.

There were no significant differences in how either group rated the impact of their training: they rated their leaders and unit cohesion highly.

Effective leadership is known to be supportive of mental health, while cohesion is associated with openness and less mental health

stigmatisation, so this might explain why SPEAR seemed to have little impact, suggest the researchers.

But they point out: "Many organisations search for a 'silver bullet' intervention that can be used to improve the [mental health](#) and wellbeing of their employees when time might be better spent refining leadership and building strong cohesion."

And any new resilience programme should be properly evaluated, they say, emphasising that their findings provide "a cautionary example of why [this] is important."

This is an observational study, and as such, can't establish cause. But the researchers nevertheless conclude: "Although the current study found no benefit for a specific intervention, this is an important finding as a great deal of time and expenditure is spent implementing such interventions without establishing whether they are effective or not.

"Doing no harm is not a reasonable defence of an ineffective intervention as time spent in delivery effectively reduces the time available for engaging in more meaningful activity."

**More information:** Resilience-based intervention for UK military recruits: a randomised controlled trial, *Occupational & Environmental Medicine*, [DOI: 10.1136/oemed-2018-105503](https://doi.org/10.1136/oemed-2018-105503)

Provided by British Medical Journal

Citation: Workplace 'resilience' programs might not make any difference (2018, December 18) retrieved 6 January 2024 from <https://medicalxpress.com/news/2018-12-workplace-resilience-difference.html>

This document is subject to copyright. Apart from any fair dealing for the purpose of private study or research, no part may be reproduced without the written permission. The content is provided for information purposes only.