

SUPPORTING THE WELLBEING OF LEGAL PROFESSIONALS IN VANUATU

INFORMING THE DESIGN AND IMPLEMENTATION OF CULTURALLY
AND CONTEXTUALLY APPROPRIATE PROGRAMMING FOR THE
GOVERNMENT OF VANUATU JUSTICE SECTOR

Shirley Viraqwareqware

Jean-Maurice Aite

Rachel Reilly



Introduction

The wellbeing of legal professionals has come under the spotlight globally in recent years.¹ Lawyers and allied professionals carry a burden of work-related stress due to routine exposure to high-pressure work environments, alongside exposure to distressing material and situations.² Excess work-related stress can lead to lower job satisfaction in the short term, and more serious mental health problems in the longer term, increasing risk of burnout, and alcohol and other drug misuse.³ At a systemic level, workforce wellbeing is important for maintaining the integrity, efficiency and effectiveness of the justice sector.⁴

In addition, legal professionals in the Pacific work in contexts which are culturally, linguistically, and geographically complex, and where work-load pressures may be amplified due to the small size of the profession and familial or kinship obligations.⁵

In response to concerns about high stress levels and unmet mental health supports needs in the justice sector, senior representatives from the sector have called on the Vanuatu Australia Policing and Justice Program (VAPJP) to support a more holistic approach to the professional development of the justice sector, including addressing factors related to wellbeing. This aligns with a growing movement in justice sectors internationally and domestically.

This research endeavors to offer guidance to the MJCS in the implementation the Ministry of Justice and Community Service's (MJCS) draft Sector Capacity Development Strategy 2023-2026⁶ and, specifically, actions under Strategy 7 "Promote a culture of learning and individual improvement". This strategy area lists "support the development of initiatives that support Staff Wellness and Wellbeing, promoting best practice, and sustainable wellness practices across the sector" as a priority action.

1 United Nations Office on Drugs and Crime: *Exploring Linkages between Judicial Wellbeing and Judicial Integrity: Report on the global survey conducted by the global judicial integrity network*. In. Geneva: United Nations; 2022.

2 Schreier C, Hulbert C, Sourdin T: *Where stress resides: predictors and correlates of stress among Australian judges and magistrates*. *Psychiatry, Psychology and Law* 2022, 29(2):290-322.

3 Krill PR, Thomas HM, Kramer MR, Degeneffe N, Anker JJ: *Stressed, Lonely, and Overcommitted: Predictors of Lawyer Suicide Risk*. *Healthcare (Basel)* 2023, 11(4).

4 United Nations Office on Drugs and Crime: *Exploring Linkages between Judicial Wellbeing and Judicial Integrity: Report on the global survey conducted by the global judicial integrity network*. In. Geneva: United Nations; 2022.

5 Program VAPaJ: *Addressing Wellbeing of Legal Professionals in Vanuatu - A Literature Review of Good Practice from the Pacific Region*. In. Port Vila, Vanuatu: VAPJP; 2022.

6 At the time of writing this revised Strategy in a completed draft form, ready for endorsement.

VAPJP recognised the importance of ensuring that programming in this space is guided by local evidence, and assessed according to indicators reflecting local models and understandings of health and wellbeing, and embarked on a research project that aimed to:

- understand the evidence on justice professional wellbeing programming in Vanuatu, Melanesia and the broader Pacific region (phase 1);
- identify workplace stressors and needs across the sector in Vanuatu through a cross-sectional survey, focus group discussions and individual interviews (phase 2), and
- identify potential actions that are culturally appropriate, relevant to the sector and feasible to be implemented through a co-design process as a pilot initially, with a view to upscale in the longer term (phase 3).

Results

Phase 1: Literature review of good practice from the Pacific region

Globally, evidence indicates that pressures and stressors on legal professionals result in higher levels of depression, anxiety, stress and substance dependence, and lower levels of mental wellbeing than members of the general population.⁷ Features of legal professionals' work environments impacting negatively on wellbeing include competitiveness, heavy workloads, poor work/life balance, billable hours, established hierarchical structures, financial pressure, normalisation of problematic alcohol use, stigmatisation of mental health issues, bullying, and harassment.⁸ Vicarious trauma is increasingly acknowledged as a problem that places legal professionals at increased risk of secondary trauma, particularly those working in the criminal justice and family law sectors.⁹

In addition to the stressors applicable to legal professionals generally, legal professionals in Pacific Island countries face additional pressures which are unique to these small island state jurisdictions. For instance:

- A low ratio of lawyers to population in some Pacific settings means that workload pressure is likely to be higher with fewer opportunities for respite than for lawyers in higher-resourced jurisdictions like Australia or New Zealand. For example, there is a ratio of 1:10470 lawyers to citizens in Papua New Guinea, 1:4188 in the Solomon

⁷ International Bar Association PTFoMWitLP: *Mental Wellbeing in the Legal Profession: A Global Study*. In.: International Bar Association

⁸ International Bar Association PTFoMWitLP: *Mental Wellbeing in the Legal Profession: A Global Study*. In.: International Bar Association

⁹ Maguire G, Byrne MK: *The Law Is Not as Blind as It Seems: Relative Rates of Vicarious Trauma among Lawyers and Mental Health Professionals*. *Psychology, Psychiatry and Law* 2017, 24(2):233-243.

Islands and in Fiji, the best resourced profession in the Pacific, it is 1:2542, compared to 1:351 in Australia.¹⁰

- At law school, most Melanesian law students study programs not necessarily based on their national legal system and often in a second or third language, which adds additional layers of complexity to understanding and applying the law.¹¹
- In many Pacific communities, and in particular in locations outside urban centres, lawyers are likely to face conflicts and ethical dilemmas due to the small size of the profession, tight knit nature of communities, kinship obligations and, in some cases, exposure to political pressure.
- In Vanuatu, lawyers are working within a system derived from English Common Law, French Civil Law, and Customary Law, often against a background of government instability.
- The adversarial nature of the common law system may present additional challenges in the Melanesian cultural context.¹²

Other external impacts include vulnerability to climate change, natural disasters, external economic shocks (such as the impacts of the COVID-19 pandemic), isolation of some lawyers in the provinces and unreliable internet connectivity. In addition, familial and kinship obligations (such as caring for elders) may contribute additional pressures on top of an individual's workload.

Activities across the Pacific that have attempted to promote the wellbeing of legal professionals have focused primarily on education through seminars, webinars, and professional development courses. Guidelines and other written resources have also been developed elsewhere. In Australia, lawyers have access to targeted telephone and face-to-face counselling.

¹⁰ Graydon C: *Situation Analysis of Pacific Lawyer Associations*. In: *Pacific Judicial Strengthening Initiative*. New Zealand Government and Federal Court of Australia; 2020 (updated May 2021).

¹¹ Graydon C: *Situation Analysis of Pacific Lawyer Associations*. In: *Pacific Judicial Strengthening Initiative*. New Zealand Government and Federal Court of Australia; 2020 (updated May 2021).

¹² *Vanuatu Australia Policing and Justice Program: Vanuatu Police and Justice Program: Six Monthly Report*. In. Port Vila, Vanuatu: VAPJP; Augsut 2022.

Pacific initiatives

Examples of Promising Practice in the Literature

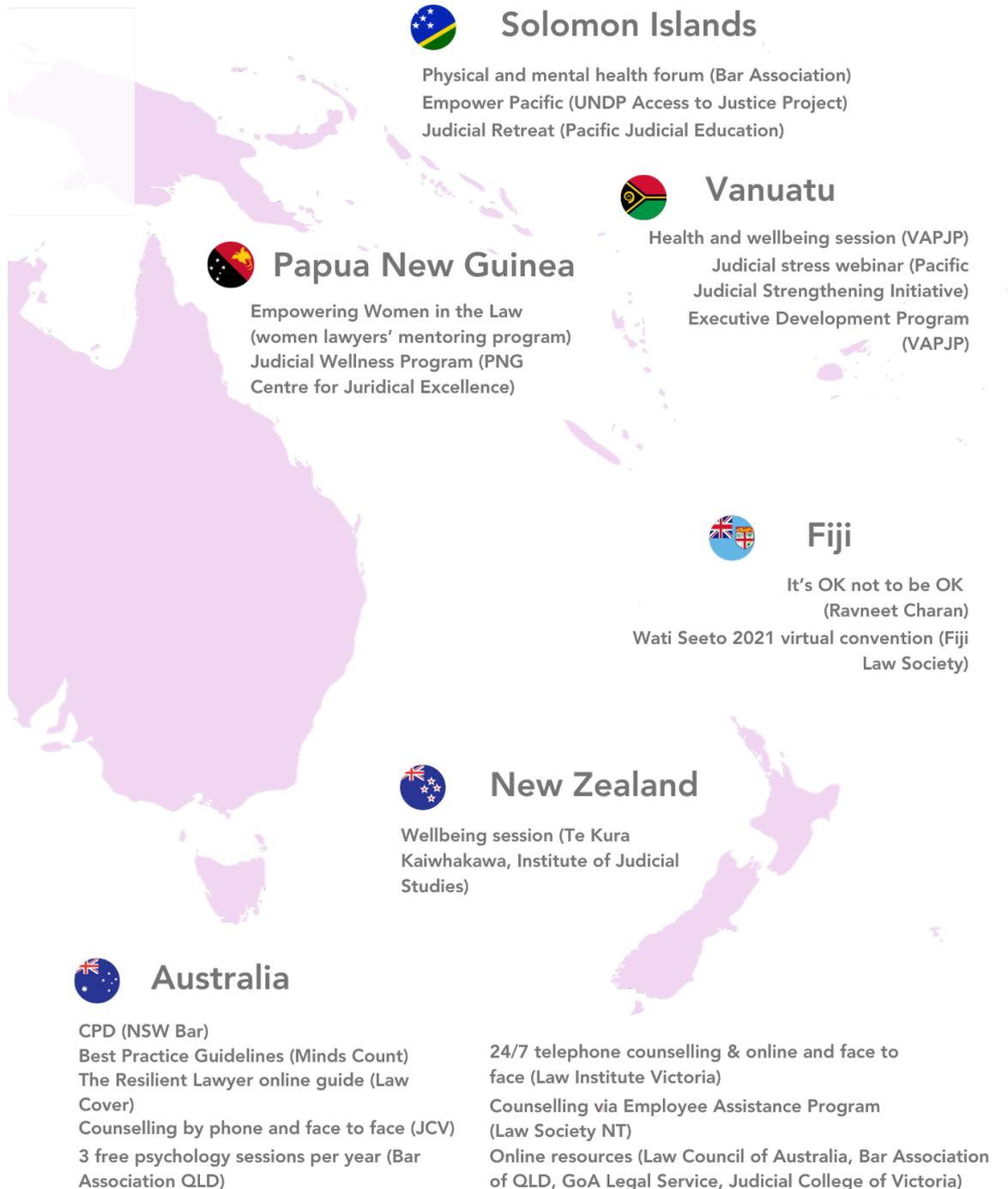


Figure 1: Examples of emerging practice in the literature¹³

Evaluation data on these programs and resources were not available.

The documented activities have largely focused on interventions based on western definitions of mental health and wellbeing, which we note may be not always be applicable to the Pacific collectivist cultural context. For this reason, there is strong resonance in this work with Indigenous approaches to research and program implementation, where western biomedical models of health and mental health have often been applied uncritically. The concern for the Program and sector is that using inappropriate assessment tools drawn from vastly different cultural and resources contexts risks leading to inappropriate actions that ignore or minimise the importance of culture in healing and wellbeing.

The key recommendation from Phase 1 was to meaningfully and sensitively consult with relevant stakeholders in Vanuatu to guide the design and implementation of culturally and contextually appropriate programming for the Government justice sector in Vanuatu.

Results

Phase 2 – Identifying workplace stressors and needs across the sector in Vanuatu - a contextualised approach

The research protocol for Phase 2 was approved by the GoV's Ministry of Health Research Ethics Committee, and this work was implemented acknowledging the importance of privileging local Ni-Vanuatu knowledge in the context of Vanuatu Australia Policing and Justice Program.

To achieve this, the research team drew on Indigenist (First Nations) research methodologies, which privilege local lived experience and knowledge, and consciously target local phenomena rather than imposing external theories on local contexts.¹⁴ These methodologies are also relational, aiming to build relationships with communities, stakeholders, and partners throughout the research process; and remaining accountable to the 'researched' community to deliver benefit.¹⁵ The principles underlying Indigenist research approaches are derived from the experiences and values of Indigenous peoples globally.

In Australia, Aboriginal and Torres Strait Islander research is guided by established ethical codes, such as the Australian Institute for Aboriginal and Torres Strait Islander Studies (AIATSIS) Code.¹⁶ While the application of the principles and corresponding responsibilities may occur differently in the Vanuatu context, the principles of self-determination, leadership, impact and value, sustainability and accountability guided all aspects of this work. These principles are intended to be transferable across different cultural contexts, bearing in mind that Aboriginal and Torres Strait Islander nations are diverse.

In the beginning phases of this work, VAPJP listened to MJCS counterparts who called for a fit-for-context examination of support in this space. This call also aligns with the Australian Government's recognition of the value in embedding its own Indigenous values of mutual respect, listening, reciprocity, and co-development in its foreign policy.¹⁷

¹⁴ Smith LT: *Decolonizing Methodologies: Research and Indigenous Peoples*. London: Zed Books; 1999.

¹⁵ Chilisa B: *Indigenous Research Methodologies: Sage Publications, Incorporated.*; 2019.

¹⁶ AIATSIS Code of Ethics for Aboriginal and Torres Strait Islander Research, 2020, <https://aiatsis.gov.au/sites/default/files/2022-02/aiatsis-code-ethics-jan22.pdf>

¹⁷ As outlined by the Australian Department of Foreign Affairs, 'Such a relational approach has been ingrained in Aboriginal Australian cultures for centuries. It is also embedded in both Pacific Islander and Southeast Asian cultures. Chiefs MNC: *Alternative Indicators of Well-being for Melanesia: Vanuatu Pilot Study Report 2012*. In. Port Vila, Vanuatu: Vanuatu National Statistics Office and the Malvatumauri National Council of Chiefs; 2012.

Project governance

The project was led by Shirley Viraqwareqware with Jean-Maurice Aite from VAPJP, and supported by A/Prof Rachel Reilly, a visiting academic researcher from Wardliparingga Aboriginal Health Equity Theme at the South Australian Health and Medical Research Institute in Australia. Shirley Viraqwareqware led the engagement with a diverse selection of contributors from each of the relevant agencies, whose support of the project was critical to its successful implementation.

Baseline cross-sectional survey

Drawing on the nascent body of local research in this space, the team chose to begin with a model of wellbeing that attempts to capture important components of Ni-Vanuatu concepts of wellbeing, incorporated spiritual, social, and financial components, alongside physical and mental wellbeing (the Frangipani Model).¹⁸

¹⁸ Scheyvens R, Movono A, Auckram J: Enhanced wellbeing of Pacific Island peoples during the pandemic? A qualitative analysis using the Advanced Frangipani Framework. *International Journal of Wellbeing* 2023, 13(1):59-78.

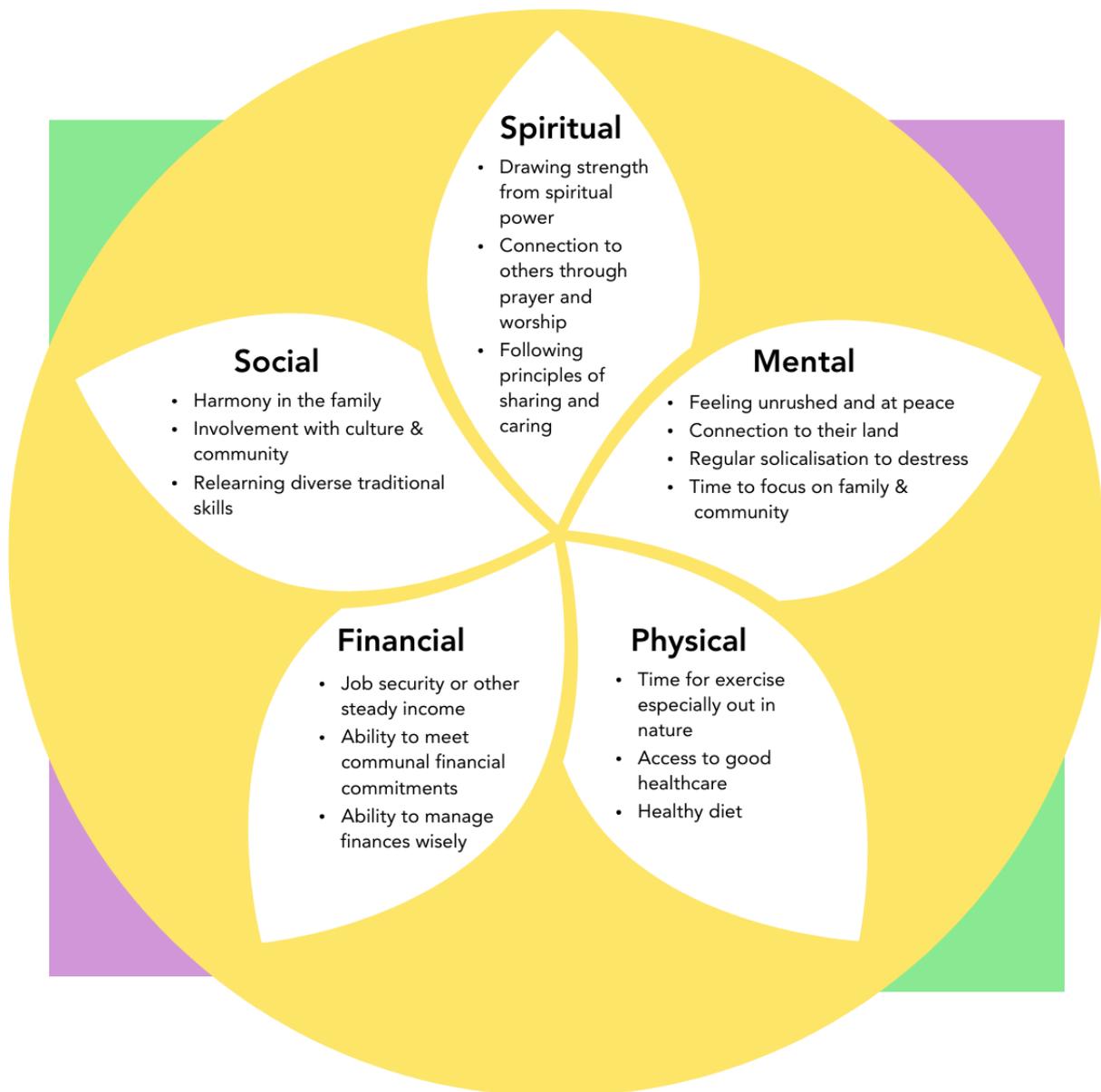


Figure 2: The Frangipani Model (Scheyvens et al. 2023)

In line with the Frangipani Model, the survey covered four broad domains. Non-identifying demographic data including age group, gender and place of work were collected. General wellbeing was defined holistically according to the Frangipani model and a previous survey.¹⁹

Questions incorporated assessment of physical, social, spiritual, and overall wellbeing, including the WHO-5,²⁰ a widely used, non-invasive assessment of wellbeing used across cultures globally. Wellbeing in the workplace was assessed via a series of statements about

¹⁹ Chiefs MNC: *Alternative Indicators of Well-being for Melanesia: Vanuatu Pilot Study Report 2012*. In. Port Vila, Vanuatu: Vanuatu National Statistics Office and the Malvatumauri National Council of Chiefs; 2012.

²⁰ World Health Organisation: *Wellbeing Measures in Primary Health Care - The Depcare Project*. In. Copenhagen: WHO Regional Office for Europe; 1998.

workplace stressors or supports, rated on a 5-point scale according to whether they were experienced 'All/most of the time' to 'Never' in the last six months.

Vicarious Trauma was assessed using the Vicarious Trauma Scale (VTS;²¹), a relatively brief and well-validated measure of VTS. Understanding the experience of VTS was also explored with a question asking if people understood what it was, and whether symptoms associated with secondary trauma, such as disrupted sleep, flashbacks, or problematic substance use had been experienced during the past 6 months.

Finally, workplace supports and strategies were rated on a 5-point scale according to whether current strategies were highly effective to highly ineffective and participants were asked to select from a list those strategies that they currently use to manage workplace stress, and those strategies they would most like to see implemented in their workplaces. The survey was anonymous to encourage participation.

Findings

Participants

Participants in the survey were 58 members of the legal profession recruited via agency representatives who championed the survey in their workplaces. The survey was delivered online via Survey Monkey. Participants accessed the survey via email or a QR code available on posters and flyers. Respondents were predominantly women (86%), which although broadly reflecting a female-dominated sector, may also reflect less engagement with this issue amongst male legal professionals. Participants were predominantly in the 35-44 years (42%) and 25-34 years (35%) age groups.

Ten (18%) were between 45 and 54 years, and there were three across the other age groups (under 24 and over 55). No participants indicated that they had a disability. There was representation from all major job roles including both lawyers, judiciary, para-legal and administrative staff, and all key agencies in Vanuatu, including the Office of the Public Prosecutor, Public Solicitor's Office, Vanuatu Law Reform Commission, Vanuatu Women's Centre, Courts, State Law Office, the Judiciary, and Ministry of Justice and Community Services.

²¹ Vrkleviski LP, Franklin J: Vicarious Trauma: The Impact on Solicitors of Exposure to Traumatic Material. *Traumatology* 2008, 14(1):106-118.

²¹ Benuto L, Singer J, Cummings C, Ahrendt A: The Vicarious Trauma Scale: Confirmatory factor analysis and psychometric properties with a sample of victim advocates. *Health and Social Care in the Community* 2018, 26(4):564-571.

Baseline wellbeing and experience of vicarious trauma

The baseline wellbeing measures are identified in Figure 3, below. These show that while the majority of participants are satisfied with most aspects of their wellbeing, there are also areas of significant concern to many participants. For example, 40% reported feeling unsatisfied with their level of cultural involvement, one in ten was unsatisfied with their access to good food, and only one in five was satisfied with how their personal time is spent. The areas of least satisfaction represent potential targets for change, and this data overall provides a baseline from which we can measure change over time as we implement activities to promote wellbeing.

Figure 3: Summary of baseline wellbeing measures



Self-reported health is generally a good indicator of overall health status²² and respondents generally rated their health as 'good' or 'very good' (83%) although no participants rated their health as 'excellent'.

Work related physical and mental wellbeing issues identified through the survey are shown below. This included fatigue (68%) and disrupted sleep (42%), emotional upset (44%) and anxiety (40%), suggesting a high work-related emotional burden. More than 30% indicated that this was affecting their family and relationships.

²² Schnittker J, Bacak V: The increasing predictive validity of self-rated health. *PLoS One* 2014, 9(1):e84933.

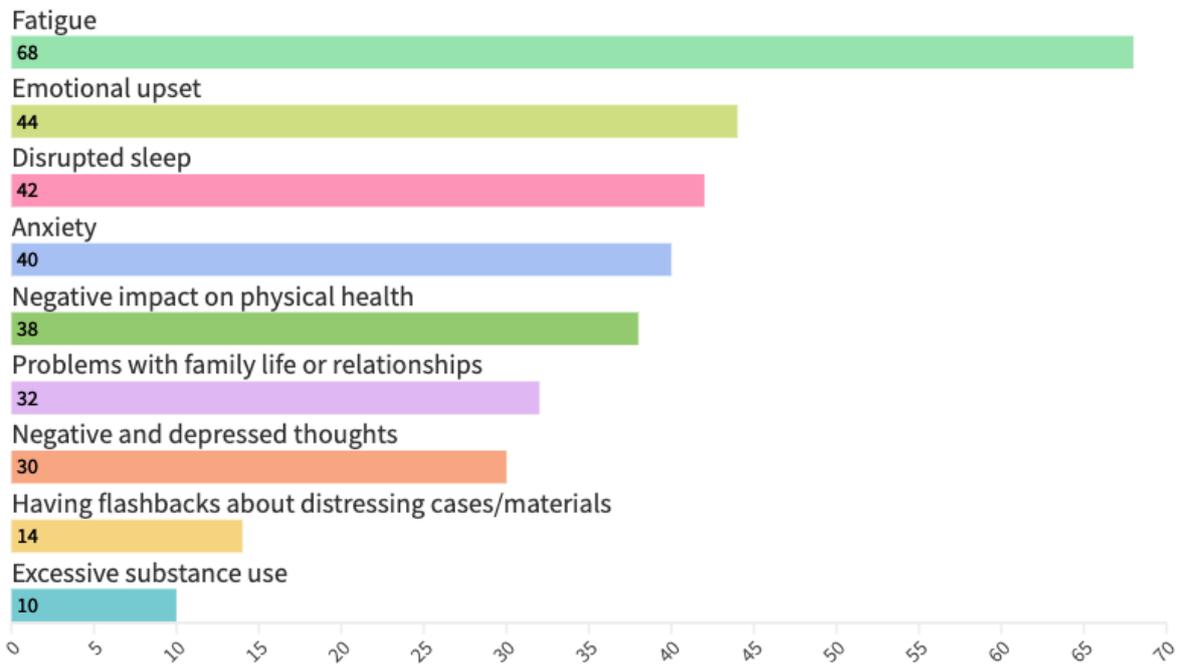


Figure 4: Work-related mental wellbeing issues across the legal sector

As shown in Figure 5, below, there was a focus on exercise as the preferred method for promoting mental wellbeing (86%) and most participants indicated they would like to see more opportunities to exercise in the workplace (55%). This corresponds with opportunities to exercise being one of the areas of least satisfaction (Figure 3, above).

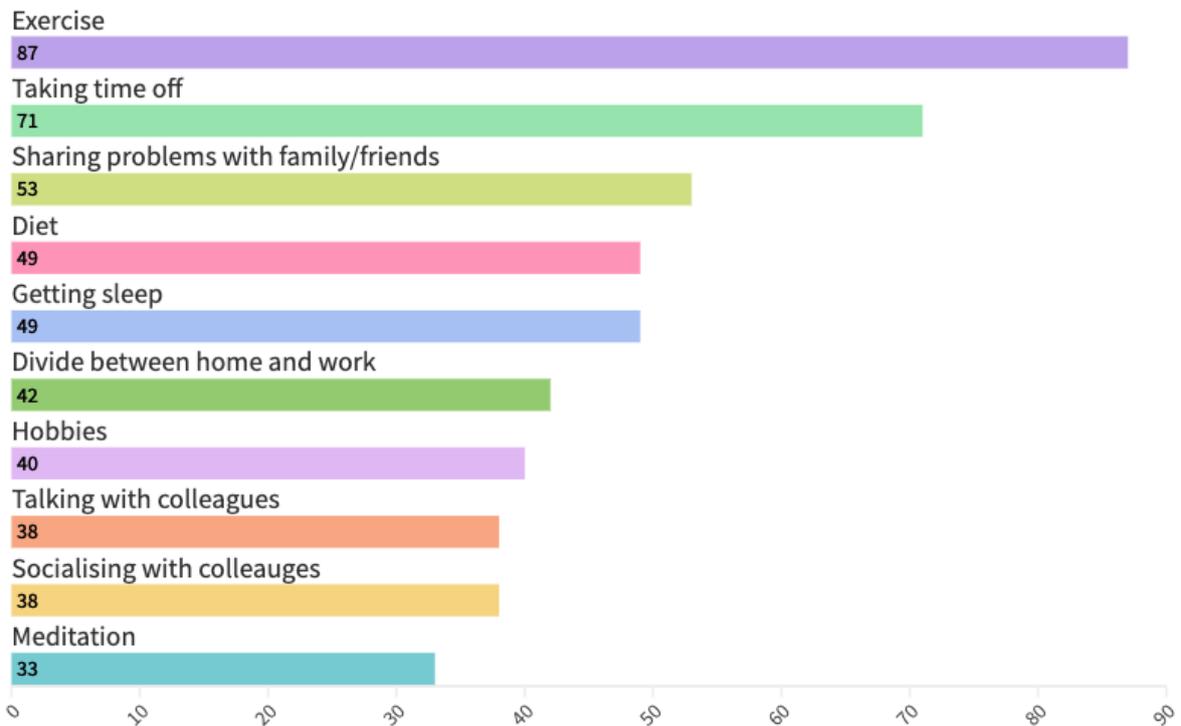
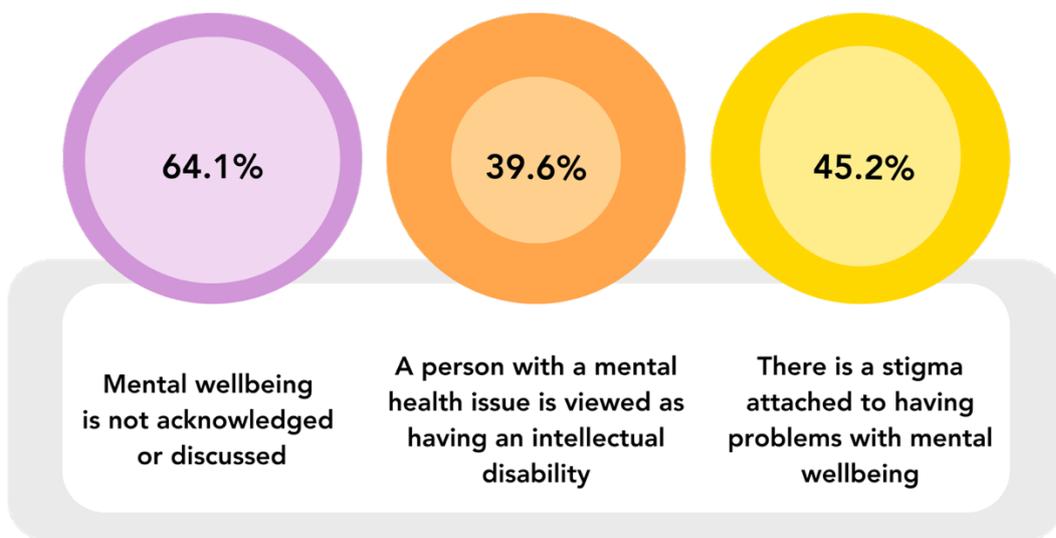


Figure 5: Preferred strategies for managing wellbeing

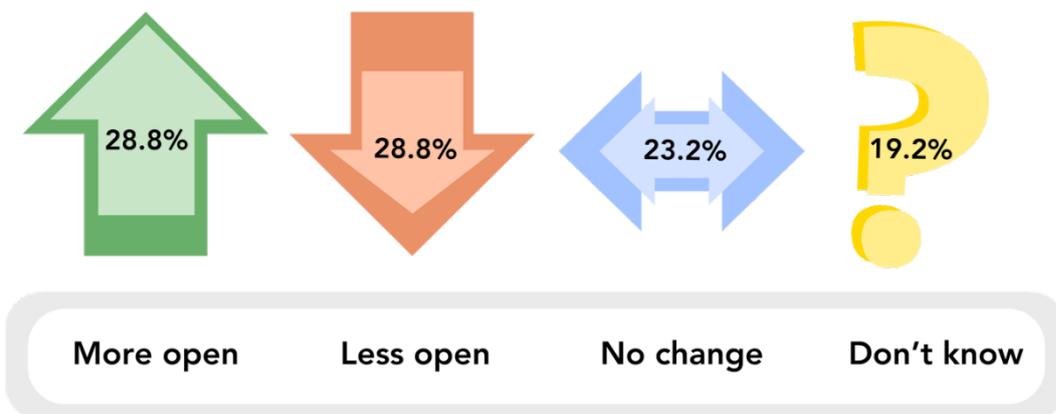
Perceptions of societal attitudes towards mental health

Responses to questions about societal attitudes indicate that mental health remains a taboo and stigmatised topic for many, with misunderstandings common. Participants were evenly split regarding whether attitudes had become more or less open over time.

Figure 6: Frequency of responses regarding perceptions of societal attitudes towards mental health



Over the past three years, community attitudes towards mental wellbeing have become:



Reasons provided in free text for the perception that attitudes were becoming more open fell into four main categories: a perceived silence around mental health; a lack of awareness; a lack of supports for people suffering mental health problems; and negative stereotypes.

1. Silence around mental health

Participants expressed a perception that mental health is a private matter, not discussed openly outside family and friends. For example:

“Most of the civil servant and employees at private sectors have suffered mentally distress but this subject has always been silent. Most people never really communicate this subject with family members and friends.”

“Because it is not an open topic, we do not see it as a topic that should be discussed, everyone minds their own business, the subject matter is not sufficiently exposed to encourage for free discussion.”

“Not so many people discuss this subject within our community.”

2. Lack of awareness / interest

For some participants, the lack of openness around mental health was due to a general lack of awareness, knowledge, or interest. For example:

“Never heard about it. Because I haven't been through any discussions or community awareness. Because there is no awareness or topics likewise to discuss and to promote wellbeing.”

“No awareness of mental health within the communities.”

“It is not something of importance to our community; People are not interested and took it to be the responsibility of immediate family and the government.”

3. Lack of supports for people with mental illness

In addition to the silence and lack of awareness about mental health, some participants suggested that a lack of resources and supports added to the lack of openness in society.

For example, [there is a] lack of awareness on how to address this type of mental issues and lack of resources to help the mental health and low support in terms of health and hygiene for the mental health:

- Because there is no facility to keep the mental patients in order to properly treat them.
- Because there [is] nothing done for the mental well-being.
- Mental well-being is never discussed in my community, inferior, never involve them in community work.

4. Negative Stereotypes

Other participants pointed to negative stereotypes as one of the reasons that attitudes were becoming less open. For example:

- Because the negative stereotype is still prevalent.
- Still youth smoking marijuana, drunkards blocking roads etc.
- If a person is found acting weird in a public place or hurling words that are offensive or inappropriate to a group of people or a person, they were considered mentally ill.

Workplace stressors and supports

The most frequent response to the question “How does your workplace currently promote your wellbeing?” was “There is no help or guidance” (38%). Other survey respondents identified some helpful existing strategies. These are displayed below in Figure 7. These strategies were mostly rated by participants as ‘somewhat effective’ (25%) or ‘neither effective nor ineffective’ (25%).

Figure 7: Top 10 workplace wellbeing promotion strategies currently in place



The strategies that staff would most like to see strengthened in the workplace are displayed below in Figure 8.

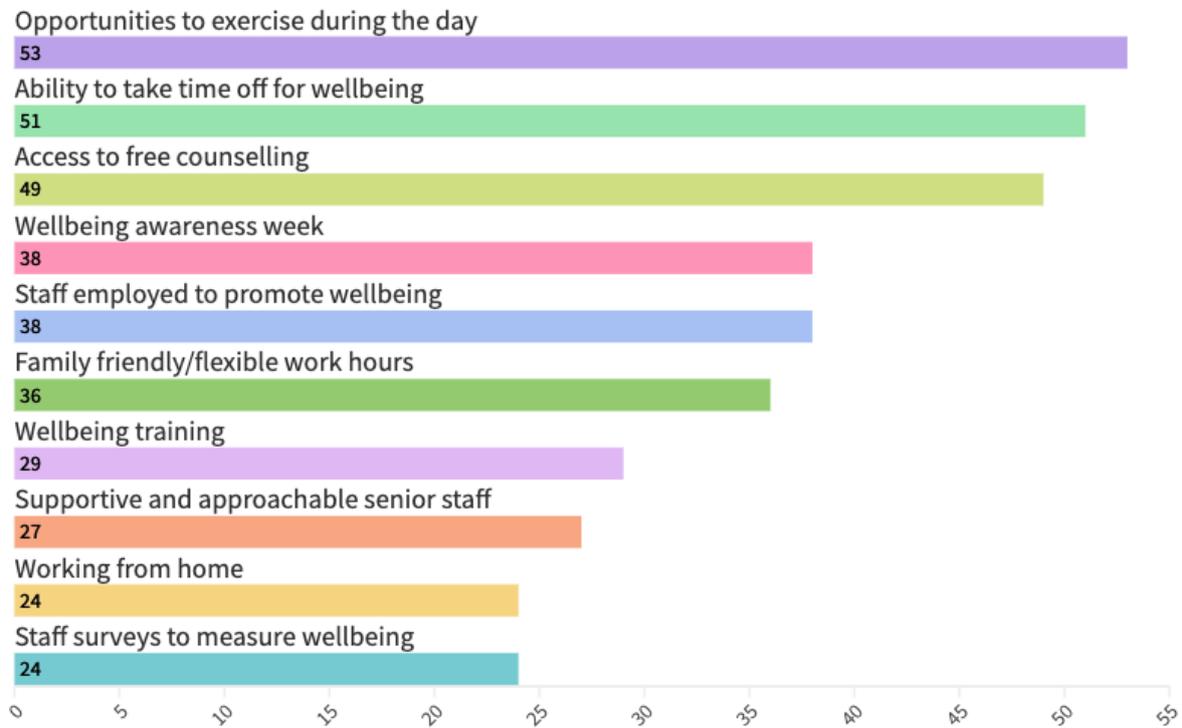


Figure 8: Most popular strategies staff would like to see strengthened in the workplace

Focus group discussions

Three focus groups were implemented in three separate agencies with legal professionals (male and female, N=11) including lawyers and administrative staff. Participants provided written consent prior to commencing the discussion. Importantly, focus group discussions were carried out in Bislama by the Ni-Vanuatu members of the research team, acknowledging the strong feedback that presence of non-Ni Vanuatu tended to change the social dynamic and prevent open discussion.

Focus groups were semi-structured, with discussion questions and prompts prepared in advance but with room for informal discussion following Ni-Vanuatu social protocols. Focus groups took place in participants' respective workplaces and were between one and two hours in length with light refreshments provided by the research team.

Focus groups were audio recorded and transcribed into English (nonverbatim) by the lead researcher. Taking a pragmatic approach with a focus on translation into action, deductive thematic analysis was conducted to elicit priority targets for action (needs), and priority actions that could then be taken to the co-design phase of research. Thematic analysis was carried out collaboratively within the research team using N Vivo Software (QSR International, Release 1.6.1) and themes decided upon through discussion until consensus was reached.

Themes outlined below fall into the three broad categories: sources of stress (workload, vicarious trauma), effects on wellbeing (Frangipani Model); and ways of coping.

Sources of stress

Workload related stress

Several participants identified heavy workloads as a primary source of stress for legal professionals. This was partly attributed to a low number of lawyers:

“In a day it is better to deal with only one issue but instead there are a many... So, our main issue is that there are not enough lawyers in this office- this office needs more lawyers - when there are not enough lawyers it causes stress so much workload and we cannot complete our work... gives us more stress. After a long hard case in court, we still have clients waiting in the office to assist them.”

Junior staff were particularly affected, and this impacted their health:

“...the allocation of cases is not fair among lawyers. Junior lawyers seem to have the biggest workload than senior lawyer... Allocation of files is not distributed evenly. I remember when I first started, I got sick every time just because I have too many cases allocated to me.”

Administrative staff also described a heavy workload with multiple tasks to complete simultaneously:

“When I have administrative work, finance tasks and the responsibility of assisting our legal colleagues, all at once, it becomes challenging to stay focused and easy to forget things.”

The work of both lawyers and administrative staff was rendered more stressful by overload in other parts of the system, for example:

“As a lawyer you want your files to be served on time but there is also one driver with one vehicle that deals with everything for the lawyers and the administration... Shortage of admin staff is something that really needs to be addressed. The number of lawyers is slowly increasing (but still not enough) however the admin staff still stay the same.”

A need for training to build the capacity of administrative staff was suggested by several participants:

“As lawyers we have opportunities for training, but admin do not ... Our admin staff really need extra support...”

And a lack of infrastructure to support the work of all staff across the sector was identified as an impediment to working efficiently:

“Power cut, no backup system in place; physical infrastructure like textbooks; data bases to access information... when we do not or have limited resources, we need more time to deliver what is expected of us.”

“There is a big need to support our admin staff. They need resources to support us. Better infrastructure...”

Vicarious trauma

For several participants, work-related stress stemmed from the nature of the work, as well as the work environment. Participants described a heavy emotional toll as a result:

“When we first started, we get angry, surprise, emotional... Most times it gets to us but further along the years it became a case we deal with and almost having the same cases all year around. But we cannot deny the fact that it impacts us in how deal with people, our relationships...”

“We become overprotective when it comes to our children. Everyone who come around your family or child is regarded as a stranger even when they a family member. This is a result of working on especially sexual abuse cases.”

Some suggested that their capacity to cope changed over time:

“Representing perpetrators is not easy, most were traumatised by the events happening in their case files, they committed offences that you find it hard to believe... but later down the track and case after case, we build confidence, courage to wear that lawyer mask, and can do that.”

Stress also stemmed from feeling directly threatened by individuals struggling with their own emotional regulation, leading to anxiety:

“During consultation while reviewing laws on sensitive issues like rape or domestic violence, we often encounter individuals who are deeply frustrated with the system and how it works. This can place us in situations where we fear for our safety, and some of us have developed anxiety as a result...”

Others identified a need for training for lawyers to deal with clients with specific needs. One participant suggested a need for translators for people from other countries, or who use sign language. Another identified a need for training to work more effectively with those who have disabilities:

“We are not trained to deal with clients that have mental disability but... we still need to provide the court with the instructions they need. It became stressful and challenging when cannot deliver to court the instructions needed...”

Effects on wellbeing

The effect of stress on wellbeing were identified in most domains of the Frangipani Model. This includes physical wellbeing:

“Some develop unhealthy habit like watching too much video or eating as a form off coping just because we are stressed.”

“Some then adopt an unhealthy lifestyle, like working through lunch and eating noodles, over consumption of Kava just not to stress over workloads.”

When talking about mental wellbeing, participants touched on exhaustion and anxiety.

“To describe our mental health, I believe everyone is feeling exhausted.”

“Some of us developed stress and frustration very easily and then to explore their temper on others.”

“I can anticipate many different scenarios that can happen in court. Anxiety can hit in during those times as well.”

The stress also impacted negatively on relationships both at work and at home:

“Most times when we are frustrated, we... put our frustration on [colleagues] which is not a healthy and nice way to do it...”

“At times we end up going home with our frustrations and that’s not a very good thing to do because our families get the result of our frustration where it was not supposed to be.”

The cumulative negative impact stressors have an impact on work performance and job satisfaction, as described by these participants:

Timeliness – “When overloaded with cases we can also miss submissions due to many cases that each lawyers have. This has an impact on lawyers’ performance.”

“We have received several complaints from the courts for... submissions not done, and late to court act but we have one bus that does ALL the run that all Lawyers and office need.”

“Some time we start to think or feel and say things like we don’t want to work here anymore...”

Ways of coping

Peer support was identified as a critical aspect of supporting mental wellbeing in the workplace:

“We notice that plenty of us needed help but one good thing about us is we talk to each other, we share and listen to each other when anyone is frustrated, and this is helpful.”

One participant suggested that in the absence of other supports, talking to colleagues is the ‘safest’ approach to relieving work-related pressures:

“All we know if you needed support seek help from our team Lead, which is something most people don’t do. For us as lawyers, we created and build this space where talking to a colleague is the most safe way so lawyers when under pressure find comfort in sharing their issues with friends and work colleagues.”

Participants spoke positively about the ability of staff to work together and resolve conflict:

“Some develop bad feelings to each other as [colleagues]. This results from Lawyers having to represent other lawyers or admin fails to deliver certain task. However, we have our way of resolving these issues and try to work together. We create a way to try and socialised with each other and try to support each other as much as possible with the limited support and resources that we have.”

“We are just being managing it. We don’t really know how to deal with it but our network as lawyers here is safe. At times we show disappointment, but we show up, earn it, and support each other and continue.”

Other participants described informal support networks that provide opportunities for debriefing:

“... sometimes, staff would walk in just to have conversation over what they are stress about. I have created that space available for them to come in and just have a conversation and have received mostly woman who come up to have a chat.”

“Staff are welcome to bring along anyone they feel comfortable with for conversations on various topics. We operate as a team, openly sharing our workload and frustration, which fosters an environment of open communication among us. Typically, we engage in debriefing sessions amongst ourselves, but it is important that we also learn to communicate with our team lead when necessary. Historically, many of us have addressed issues individually or with our friends and colleagues.”

Co-design workshop and recommendations

An ecological model of health (Figure 9) views individuals embedded within social systems that influence health and multiple levels of wellbeing.²³ In this way, it challenges biomedicine's focus on the individual, recognising health and wellbeing are linked to upstream factors (social determinants) and to the relationships and systems in which people live.²⁴

Such an approach is consistent with more relational models of health²⁵ as are dominant in the Ni-Vanuatu cultural context, including the Frangipani model employed in this work.²⁶

Health promotion activities that intervene at multiple levels of an ecological framework offer greater possibilities for promoting health than those intervening at only the individual level. An ecological framework provides a helpful lens through which to plan wellbeing promoting activities, to ensure we are maximising impact by targeting multiple ecological levels.

A Co-Design Group was established with representatives from key agencies to review the findings and develop recommendations for action to respond to the needs identified. The research team presented the detailed findings, organised around the key issues identified in the data. These were:

- Excessive workloads lead to anxiety and stress, which in turn lead to sleep and lifestyle issues, impacting relationships, increasing risk of poor health outcomes.
- Workplace stress and vicarious trauma are common, and negatively impact health, mental health, job satisfaction, productivity, and relationships. Knowledge about vicarious trauma is low.
- There is a stigma and silence around mental health that stops people from talking about it or seeking support when needed.
- The most popular strategy to manage workplace stress is exercise, but people also reported a lack of opportunity to exercise.
- Most people don't know where to go if they do need help and think that workplaces should do more to provide support to employees.

²³ McLeroy KR, Steckler A, Bibeau DE: *The social ecology of health promotion interventions*. *Health Education Quarterly* 1988, 15(4):351-377.

²⁴ McLeroy KR, Bibeau D, Steckler A, Glanz K: *An ecological perspective on health promotion programs*. *Health Educ Q* 1988, 15(4):351-377.

²⁵ Rowley K, Doyle J, Johnston L, Reilly R, McCarthy L, Marika M, Riley T, Atkinson P, Firebrace B, Calleja J et al: *Strengths and limitations of a tool for monitoring and evaluating First Peoples' health promotion from an ecological perspective*. *BMC Public Health* 2015, 15(1215).

²⁶ Scheyvens R, Movono A, Auckram J: *Enhanced wellbeing of Pacific Island peoples during the pandemic? A qualitative analysis using the Advanced Frangipani Framework*. *International Journal of Wellbeing* 2023, 13(1):59-78.

To initiate the discussion, the research team presented some possible targets for action drawn from the findings, and considered through the lens of the ecological model as shown in Figure 9, below.

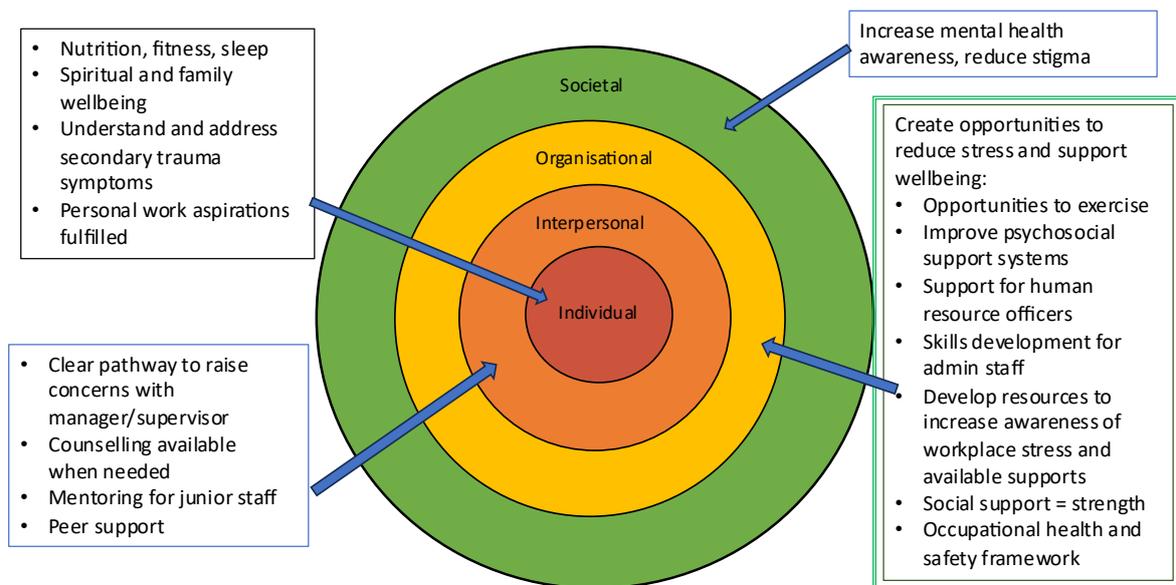


Figure 9: Possible actions targeting different ecological levels

Using this information as a guide, the group then participated in a structured discussion co-facilitated by Shirley Viraqwareqware and Rachel Reilly, and from this discussion developed three primary recommendations to be implemented in partnership with agencies, from December 2023.

Recommendation 1: Resources (online and written) to provide information on wellbeing

Develop and disseminate resources to increase knowledge and awareness about key mental wellbeing issues in the justice sector workplace, including vicarious trauma (and how to prevent it), holistic wellbeing promotion, stress management and referral pathways. Some resources will be for general use across the sector, and others may be more specific, for example, meeting the needs of administrative staff, or guidelines for managers and supervisors about how to create a work environment that supports mental wellbeing.



The co-design group suggested that these resources should be available as pamphlets, posters, or booklets, as well as online.

In terms of the ecological framework, this activity targets individual knowledge, organisational environments, and supports public policy that aims to raise awareness at the societal level.

Recommendation 2: Creating opportunities to exercise for physical and social wellbeing

The desire to have opportunities to exercise was one of the strongest messages from the research findings, aligning with both exercise as a stress management strategy, and the strong value apparent in the data for opportunities to interact socially with work colleagues. Acknowledging that there have been various recent efforts to run sports programs for the justice sector (e.g., Wednesday sports), the co-design group suggested that a Sports Committee with representatives from legal agencies, which operated before Covid lockdowns, be reinstated to plan and manage sporting events.

Additionally, the group supported the idea of sector staff having access to a gymnasium for ad-hoc fitness sessions, for example before or after work or during a lunch hour. The VAPJP program staff can help explore possible options for this.

In terms of the ecological framework, this activity targets individual fitness and positive interpersonal relationships. It may in turn impact the organisational culture of the workplace.

Recommendation 3: Psychosocial support officer program

Establish psychosocial support officer positions within each agency who will receive training in mental health first aid, stress management, early signs of vicarious trauma and burn-out and prevention of stress-related harms. These positions will be drawn from existing staff, for example human resource officers, who in some cases already offer this type of support on an informal basis. With limited freely available counselling services in Vanuatu, psychosocial support officers will provide basic support onsite, and offer referral information to staff who require more intensive support. They will also document and communicate identified professional development needs, and actively seek opportunities to promote wellbeing in the workplace. A peer support group comprising all psychosocial support officers from across the sector could be established to ensure the psychosocial support officers themselves have access to ongoing support and information to support their role.

This recommendation aligns with the Ministry of Health's Strategic Plan 2021-2030.²⁷ Strategy 4.3 seeks to 'Foster capacity of selected civil society leaders through the provision of training and ongoing mentorship in psychosocial support and counselling capacity building.' This is with a view to forming agreements with relevant Ministries, including Justice, that facilitate the integration of programs and initiatives within institutions (p.26).

Next steps...

Pilot and evaluation

Development of resources and training materials is underway with a view to piloting commencing from December 2023. A 'Developmental Evaluation' approach is being adopted, enabling ongoing monitoring and reflective practice. Developmental evaluation supports drawing on a range of methods, depending on the context, and occurs in real-time to enable adaptation and enhancement as part of the evaluation.²⁸

Individual strategy/action level evaluation will incorporate coverage, uptake, fidelity, cost, appropriateness, feasibility, and sustainability. Overall impact on the wellbeing sector will be assessed repeating the cross-sectional survey after 6 and 12 months.

The aim will be to have a clear set of quality, appropriate, and sustainable contributions to mental health and wellbeing for personnel in the justice sector that will be sustained and continually improved over time.

²⁷ McLeroy KR, Bibeau D, Steckler A, Glanz K: *An ecological perspective on health promotion programs*. *Health Educ Q* 1988, 15(4):351-377.

²⁸ Patton MQ: *Developmental evaluation: Applying complexity concepts to enhance innovation and use*: Guilford Press; 2011.