



**International Stress
Management Association^{UK}**

Promoting well-being and stress prevention

ISMA^{UK} Comprehensive Knowledge for Stress Management Practitioners

August 2010

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ISMA^{UK} COMPREHENSIVE KNOWLEDGE FOR STRESS MANAGEMENT PRACTITIONERS

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1. DEFINITIONS

In the context of this document:

- **Comprehensive knowledge** means **full, in-depth** knowledge of Stress Management in its entirety.
- **Core Knowledge** – the level of knowledge required in a certain aspect of stress management to meet the membership level criteria.
- **Overview** – A basic knowledge of a subject or group of subjects
- **Awareness** – Acknowledgment of the existence of a subject and where it fits in.

ISMA^{UK} COMPREHENSIVE KNOWLEDGE FOR STRESS MANAGEMENT PRACTITIONERS

2. COMPREHENSIVE KNOWLEDGE

A. KNOWLEDGE REQUIRED TO MATCH MEMBERSHIP CATEGORIES

Core Knowledge requirements which are marked in red throughout.

ISMA ^{UK} COMPREHENSIVE KNOWLEDGE SECTIONS	MEMBERSHIP ROUTE		
	Complementary Therapists	Personal/Coach	Corporate
B UNDERSTANDING STRESS i Basics ii Physiology iii Short and long-term responses iv Stressors	Core Knowledge as shown in sections Bi - iv required by all categories		
C MANAGING STRESS i Behavioural strategies ii Psychological strategies and techniques iii Physiological strategies iv Therapeutic approaches	Core Knowledge Required as shown in C i - iii + Expert in C iv	Core Knowledge required as shown in Sections C i - iii	
D STRESS AND THE WORKPLACE i Stress and Organisations ii Stress and the Law iii HSE Guidance on work-related stress iv Workplace stress management interventions			Expert in all
E CONTROVERSIES	Core Knowledge Required		

B. UNDERSTANDING STRESS

i. Basics of Stress

This section outlines the basic level of understanding that should be achieved by all Stress Management Practitioners, no matter which branch of stress management they choose to pursue. It starts with recognition that there is no universally accepted definition of stress and knowledge of some of the key definitions that are currently in use. It includes understanding that the stress concept and stress management practice include issues relating to both causes and effects of stress. An overview of the types of intervention that can be used to prevent and manage stress is also included – looking at both individual and organisational level. Finally, an understanding of the range of models of stress that exist and what they contribute completes this basic level of stress management comprehensive knowledge.

a. Definitions of stress

- UK Health and Safety Executive (HSE) definition*
- Institute for Occupational Health and Safety (IOSH) definition
- ISMA^{UK} definition

Core Knowledge Requirement – The HSE definition and one other.

□ □

b. Causes and effects of stress

Recognition that “stress” and stress management covers issues relating to causes of stress (stressors – see section 2Biv), the physiology of the stress reaction (see section 2Bii) and the effects of stress (see section 2Biii)

Understanding of the relevance to stress and stress management of the interaction between an individual and their environment

Core Knowledge Requirement – both above

c. Overview of interventions to prevent and manage stress

Understanding of the distinction between primary, secondary and tertiary interventions

Examples of primary interventions at individual and organisational level – identifying and tackling sources of stress

Examples of secondary interventions at individual and organisational level – modifying responses to stress

Examples of tertiary interventions at individual and organisational level – recovering from stress related problems

Core Knowledge Requirement – All of the above

d. Models of stress

Recognition that there is a range of different models of stress and different ways of categorising them

- General Adaptation Syndrome*
- Yerkes-Dodson/Human Function Curve
- Process Models
- Cognitive/psychological Models
- Transactional Models
- Micro-/macro-stressors Model
- Demand-Control-Support Model
- Person-Environment Fit Model
- Cybernetic Models

Core Knowledge Requirement – Item marked * and 3 of the above

ii. Psychophysiology

This section deals with the psychophysiology of the stress response. Stress Management Practitioners need to have an understanding of the biology of the stress response in order to appreciate:

- how to recognise signs and symptoms of stress
- how stress can lead to ill health problems
- how stress can affect performance
- the way in which stress can arise through the way we behave, and
- the rationale for recommending coping strategies.

a. Basic anatomy and physiology

- Concept of homeostasis
- Structure and function of the body systems:
- Cardiovascular, respiratory, skeleto-muscular, digestive, renal, immune, endocrine, reproductive

Core Knowledge Requirement – all of the above

b. Structure and function of the nervous system

- Peripheral and Central Nervous systems *
- Autonomic nervous system:
- Parasympathetic and Sympathetic *
- Nerves, nerve impulses, synapses and neurotransmitters *
- Brain: main structural divisions and functions
- Hypothalamus and vegetative functions
- Limbic system and emotions
- Cortex and cognition

Core Knowledge Requirement – those above marked * and one other

c. Stress response

- Alarm / fight and flight response
- Resistance/Adaptation response
- Adrenaline, Noradrenaline and Cortisol
- Normal signs of stress response activity:
- Physical, mental and behavioural
- Signs of overactivation of stress response activity:
- Physical, mental and behavioural

Core Knowledge Requirement – all the above

d. Psychoneurophysiology

- Psychoneuroimmunology
- Psychoneuroendocrinology

Core Knowledge Requirement – both the above

iii. Short and Long Term Outcomes

This section focuses on the ways in which over activation and prolonged action of the stress response can lead to illness, poor performance and relationship difficulties. Proposed biological mechanisms of the effect of prolonged and excessive stress, for example immune system suppression and coronary heart disease, are considered.

a. Stress related disorders and diseases

- Cardiovascular
- Respiratory
- Digestive
- Musculoskeletal
- Immunological including cancer, infections and allergies
- Others including diabetes, skin disorders, fertility
- Behavioural including eating, sleep and sexual disorders, substance use and abuse
- Emotional including anxiety, fear, phobias, obsessive disorders, depression
- Post traumatic stress disorder

Core Knowledge Requirement – all of the above

b. Stress and performance

- Performance curve
- Stress, performance, work and life.

Core Knowledge Requirement – both the above

c. Stress and relationships

Core Knowledge Requirement

iv. Stressors

This section outlines what could be described as the *sources* of stress, whether originating in the environment or within the individual themselves. Understanding of stressors also includes gaining clarity on a certain muddled use of language in relation to the stress concept.

Firstly, many people routinely use the word “stress” (instead of “stressors”) to describe the external conditions, or pressures they face. ISMA^{UK} acknowledges, and adopts, the Health & Safety Executive’s use of the word stress only in relation to the *reaction* experienced; the word *pressure* or *stressor* being reserved for the input to, or source of, that reaction.

Secondly, many people claim that certain situations “make” them stressed. The word “stressors” would in this case describe the *causes* of stress. However, although certain external factors such as physical discomforts, significant life events and psychosocial hazards in the workplace are commonly associated with stress in many people, it is important to recognise the role played by the individual’s perception and cognition. It can be argued that stressors do not cause stress without certain internal factors.

So, this section is divided into two major parts: the external stressors, or pressures, and the internal causes of stress, representing the way people take their experiences.

Practitioners should further be aware of differing perspectives on the link between stressors and stress, including criticisms of the prevailing discourse on stress for being overly individualistic or failing to treat the stress concept in its sociological and historical context: see Section E: Controversies.

a. External sources of pressure

For risk factors for stress in the workplace (such as demands, control, support, relationships, change, role), see section 2D

- Life Events including knowledge of the debate regarding the applicability of the Holmes-Rahe Life Events Rating Scale and knowledge of versions of the scale allowing for individual appraisal of events
- Relationships / Bullying
- Cultural / Diversity issues
- Cumulative effects of minor stressors: hassles and uplifts
- Impact of changing work life: 24/7 culture; dual career or single-parent families etc
- Information Society: email management, information overload, technological management
- Work-Life balance
- Modern-day societal frustrations: email spam / viruses; traffic jams / road rage etc

Core Knowledge Requirement – all of the above

b. Internal causes of stress (representing the way people interpret an event as stressful)

- Stress hardiness
- Locus of control
- Negative affectivity
- Emotional intelligence
- Self-acceptance vs. self-esteem
- “Workaholism”
- Psychological acceptance
- Type A behaviour

Core Knowledge Requirement – all the above

C. MANAGING STRESS

i. Behavioural strategies

This section lists the key behavioural strategies for managing stress at individual level. These are skills that can be learned by individuals in a training, coaching or self-taught context. They are generally intended to be preventative in nature. Mostly they are at the primary intervention level, meaning that their objective is to prevent stress from occurring by tackling causes of stress at source. However, they may also have a secondary intervention aspect, helping individuals to deal with inevitable pressures by modifying their responses in order to prevent negative stress-related outcomes.

Some of these strategies, such as analysis of sources of stress, are focused on reducing stress directly. Others, such as time management and assertiveness, do not have stress as their primary focus, but are useful for stress management. It is essential for all Stress Management Practitioners to have an awareness of the range of behavioural strategies available and what they involve, but in depth understanding of individual strategies will only be required for certain branches of stress management practice.

a. Behavioural strategies focused on reducing stress

Analysis of sources of stress and targeted action to reduce exposure to stressors

Behavioural rehearsal and role play/case studies to improve management of stressful situations

Changing type A behaviour (behavioural aspects)

Exposure programmes

Core Knowledge Requirement – Overview of above, plus 2.

b. Behavioural strategies that are useful for stress management

- Prioritisation
- Time management
- Assertiveness
- Communication and interpersonal skills
- Conflict management
- Goal-setting
- Tools and techniques (e.g. Stephen Covey's Circle of influence)
- Work-life balance strategies
- Decision-making and problem-solving
- Social support

Core Knowledge Requirement – Overview plus 5

ii. Psychological strategies and techniques

This section lists the main psychological strategies and techniques that can be used to help people manage stress and deal with stress-related disorders. If some of these strategies are used in coaching or training contexts they could be considered as preventative. However, if used within stress counselling or psychotherapy they would be considered as a tertiary stress management intervention.

The strategies and techniques have been divided into four main headings to help distinguish between them. General strategies usually encompass techniques taken from a combination of the cognitive, emotional or imagery modalities.

For the stress management Core Knowledge, it is not essential to have in-depth understanding of all the listed strategies and techniques below. However, a general knowledge of over 60% from each section would be considered a minimum. If these techniques are applied by the practitioner, it is important to know when strategies are indicated or contra-indicated and for the practitioner to receive on-going supervision of their practice.

a. General psychological strategies and concepts

- Anger management
- Anxiety management
- Emotional management
- Stress Management/Stress Control
- Problem-solving training
- Improving emotional intelligence
- Laughter and humour
- Spiritual/religion
- Self-esteem and self-acceptance concepts
- Cognitive underpinnings of emotions

Comprehensive Knowledge Requirement – Overview + 5

b. Cognitive techniques

- Thinking errors and thinking skills (i.e. cognitive distortions)
- Thinking errors audit
- Cognitive rehearsal
- Coping statements
- Challenging perceptions and beliefs
- Downward arrow and inference chaining
- Socratic questioning
- Stress diary
- Stress thought records/forms
- Thought blocking/stopping
- Hypnosis based on a cognitive script
- Rational-emotive

Core Knowledge Requirement – 5 of above

c. Emotional techniques

- Feeling identification
- Emotional expression
- Empty chair technique
- Shame attacking

Core Knowledge Requirement – An awareness of above

d. Imagery techniques

- Aversive
- Coping
- Imaginal exposure
- Imaginal rehearsal
- Implosion/flooding
- Motivation
- Positive
- Relaxation
- Time projection
- Trauma coping
- Imagery exercises to improve images

Core Knowledge Requirement – Overview of above

iii. Physiological Techniques

This section deals with techniques for managing stress that are based on biological principles. The importance of reviewing lifestyle, practising relaxation and the influence of love, support, humour and laughter are considered.

a. Musculoskeletal and Mental

- Muscular relaxation
- Stretching
- Yoga
- Massage
- Meditation
- Mindfulness
- Alpha feedback
- Hypnosis
- Imagery
- Visualisation
- Autogenic Training
- T'ai Chi
- Colour Therapy
- Music/Sound Therapy

Core Knowledge Requirement – an understanding of benefits/usefulness of some of above.

b. Breathing

- Diaphragmatic breathing
- Deep breathing
- Quieting Reflex

Core Knowledge Requirement – all the above

c. Sleep

- Napping
- Day Dreaming
- Dealing with insomnia
- Dreaming

Core Knowledge Requirement – all the above

d. Exercise

- Fitness
- Exercise regimes
- Aerobic exercise

Core Knowledge Requirement – all the above

e. Nutrition and diet

- Balanced diet
- Vitamin and Mineral Supplements
- Water intake to avoid dehydration

Core Knowledge Requirement – all the above

f. Substance use and prescription drugs

- Caffeine
- Alcohol
- Nicotine
- Drugs; anti-anxiolytic, antidepressants, beta-blockers

Core Knowledge Requirement – all the above

g. Love and Support

Core Knowledge Requirement

h. Humour and Laughter

Core Knowledge Requirement

j. Biofeedback

- Galvanic skin response
- Skin temperature
- Alpha waves

Core Knowledge Requirement – overview required

k. Use of Senses in reducing stress response activity (VAKOG):

Core Knowledge Requirement - overview required

iv. Therapeutic approaches

This section lists the main counselling and psychotherapy approaches that can be used to help clients suffering from stress and stress-related disorders. Therapy is usually considered as a tertiary stress management intervention and may help a person to recover from the deleterious effects of stress and stressful events. Some of the approaches listed below have been adapted to the fields of coaching and training and could be viewed as preventative in nature. Some of the therapeutic approaches such as Behaviour, Cognitive, Cognitive-Behaviour and Problem-solving psychotherapy have been underpinned by substantial amounts of academic research which highlight their effectiveness in dealing with clinical disorders such as depression, anxiety, panics, phobias, Post Traumatic Stress.

For the stress management Core Knowledge, it is not essential to have in-depth understanding of all the listed therapeutic approaches below. However, a general knowledge of the main approaches and when they are indicated or contra-indicated is important for the purposes of referral of stressed clients or trainees to appropriately qualified practitioners. These approaches have been asterisked.

a. Counselling and psychotherapeutic approaches

- Adlerian
- Behaviour*
- Cognitive*
- Cognitive Analytic
- Cognitive-Behaviour*
- Counselling skills
- Eclectic
- Existential
- Gestalt
- Hypnotherapy
- Integrative
- Multimodal
- Neuro-Linguistic Programming
- Person-Centred*
- Personal Construct
- Primal
- Problem-solving/problem-focused
- Psychosynthesis
- Psychodynamic (Freudian)*
- Psychodynamic (Jungian)
- Psychodynamic (Kleinian)
- Rational Emotive Behaviour*
- Reality
- Solution Focused
- Transactional Analysis

Core Knowledge Requirement – Basic knowledge of those marked with black asterisk and overview of half of above. A Personal/Coach applicant needs to be expert in one or two of these items.

b. Complementary therapy

This section lists a number of the popular complementary therapies. Often, clients will wish to use complementary approaches either alone or in conjunction with more conventional approaches and methods. It is important to note that these approaches have been included for purposes of reference only and do not necessarily form part of the ISMA^{UK} Core Knowledge. Certain therapies such as Candle Therapy are not recommended according to the Institute for Complementary Medicine (see website). However, a general knowledge of complementary therapies may be useful for stress management practitioners.

Complementary therapies

- Acupressure
- Acupuncture
- Alexander technique
- Aromatherapy
- Aqua Touch
- Auricular Acupuncture

- Ayurveda
- Bach Flowers
- Bates Method
- Biodynamic Massage
- Bowan Therapeutic Touch
- Candles
- Chelation Therapy
- Chiropractic
- Chinese Medicine
- Colonic Hydrotherapy
- Colour Therapy
- Cranial Osteopathy
- Crystal Healing
- Dolphin Therapy
- Feldenkrais
- Flotation in water
- Geopathic Stress
- Gerson Therapy
- Healing
- Hellerwork
- Herbal Medicine
- Homeopathy
- Hydrotherapy
- Hypnotherapy
- Iridology
- Kinesiology
- Kosmed
- Mactimoney Chiropractic
- Manipulative Medicine
- Massage
- Meditation
- Music Therapy
- Naturopathy
- Nutritional Therapy
- Orthomolecular Therapy
- Osteopathy
- Oxygen Therapy
- Pilates
- Polarity Therapy
- Pranic Healing
- Qi Gong
- Radionics
- Reflexology
- Reflex Touch
- Reiki
- Rolfing
- Shiatsu
- Sports Massage
- Swedish Massage
- Tai Chi

- Traditional Chinese Medicine
- Tragerwork
- Transcendental meditation
- Tuina
- Yoga
- Zero Balancing
- Zone Therapy

Core Knowledge Requirement – An awareness of the variety of therapies available.

A Complementary Therapist Member will need a professional qualification in at least one of these.

D. STRESS AND THE WORKPLACE

i. Stress and organisations

This section can be regarded as an introduction to issues relating to stress in the workplace. It covers the potential organisational outcomes that may result from stress, which can also be seen as the business rationale for employers to take action to manage work-related stress. It outlines the models of stress that are particularly relevant to the workplace, of which stress management practitioners should have some understanding. It also mentions the long hours culture, awareness of which is important for all stress management practitioners.

a. Organisational outcomes of stress/business rationale for stress management

- Sickness absence
- Staff turnover
- Accidents
- Lowered staff morale
- Reduced performance
- Litigation
- Insurance premiums

Core Knowledge Requirement – for corporate category, an in-depth knowledge of all the above.

b. Workplace models of stress and well-being

- Demand-Control-Support Model
- Person-Environment Fit Model
- Effort-Reward Imbalance Model
- Cybernetic Models
- Socio-technical Systems approach and job characteristics
- Transactional Models

Core Knowledge Requirement – for corporate category, three of the above.

c. Work-related Stressors

- International comparisons of working hours
- Links between long hours and stress
- Vulnerable groups

ii. Stress and the Law

This section covers a basic understanding of the current statutory, common and contractual law as it relates to stress. Stress Management Practitioners should be familiar with the basic legal position, whether or not they offer their services in the workplace. An understanding of the legal issues will shed light on media coverage of stress cases and claims, give some perspective on the circumstances of individual clients and also forms part of the “business case” for intervening to reduce stress at work

The notes and references here are based on the situation in November 2003, when the Comprehensive Knowledge document went to press. Practitioners should find a suitable method of keeping up to date with legal developments, as indicated under the References section below

a. Statute law

Health & Safety at Work etc Act 1974

s.2: duty to ensure, so far as is reasonably practicable, the health, safety & welfare of workforce.

s.53: personal injury includes “any disease and any impairment of the person’s physical or mental condition”

Employers should balance the risks against the measures (financial & practical) necessary to avert them.

Management of Health & Safety at Work Regulations 1999

Regulation 3: Risk assessment

Regulation 4 and Schedule 1 (duty to apply principles of prevention)

Regulation 13 (duty to ensure employees’ capability and to provide training)

Regulation 19 (duties towards young people)

Disability Discrimination Act 1995 and Disability Discrimination Act 1995 (Amendment) Regulations 2003 includes mental conditions which are “a clinically well-recognised illness”. Therefore, someone who is suffering a clinically recognised mental illness as a result of stress may be eligible for “reasonable adjustments” to be made to accommodate their situation, just as though they had a physical disability.

Other Relevant Acts and Regulations

Safety Representatives and Safety Committees Regulations 1977

Health and Safety (Consultation with Employees) Regulations 1996

Draft Information and Consultation of Employees Regulations, July 2003

Working Hours Regulations 1998 as amended (in 1999, 2001, 2002 and 2003)

Noise at Work Regulations 1981

Control of Substances Hazardous to Health Regulations (COSHH) 1999

Manual Handling Operations Regulations 1992

Reporting of Industrial Diseases and Dangerous Occurrences (RIDDOR) Regulations 1995

Provision and Use of Work Equipment Regulations (PUWER) 1998

Workplace (Health Safety and Welfare) Regulations 1992

Display Screen Equipment Regulations 1992

Employment Rights Act 1996

Sex Discrimination Act 1975 and later amendments

Employment Equality (Sexual Orientation) Regulations 2003

Employment Equality (Religion or Belief) Regulations 2003

Race Relations Act 1976 and later amendments

Prevention of Harassment Act 1997

Public Order Act 1986

Data Protection Act 1998

Core Knowledge Requirement – Knowledge of first three, with overview of the remainder and understanding of their relevance.

b. Common Law (Negligence)

The employer can be liable (in a civil case) for breach of the common law duty to provide a safe working environment, where failure to provide a safe system of work results in reasonably foreseeable psychiatric illness or injury, provided that:

The claimant must have a “recognised injury” in order to make a successful claim.

The employer was, or should have been, aware of the risk (it was “reasonably foreseeable”), establishing a duty of care, and

The employer failed to take steps a reasonable employer would have taken to protect the employee, i.e. a breach of that duty of care, and

The employee thereby sustained a recognised (physical or psychiatric) injury, and

The employee’s ill health was directly due to the employer’s failure to improve the conditions of work, establishing causation.

Core Knowledge Requirement – All of the above.

Cases:

Walker v Northumberland County Council [1995] – the original “landmark” stress case

Beverley Lancaster v Birmingham City Council [1999] – first case where employer admitted liability

Sutherland v Hatton [2002] - signs of stress in a worker must have been obvious to the employer for the worker to succeed in a stress related claim and an employer can usually assume that an employee can withstand normal job pressures (unless he knows of a particular problem or vulnerability): the onus is normally on a worker to complain about stress and to bring it to the attention of the employer. Also, an employer who offers a confidential counselling service is likely to have a defence to a stress related claim by a worker. Court of Appeal judges

in this case issued a set of 16 guidelines specific to stress-related cases.

Young v The Post Office [2002] – shows the very high level of care the Courts expect employers to exercise in favour of an employee who is known to be prone to stress related illness.

Essa v Laing Ltd [2003] – Employment Appeal Tribunal ruled that in sex, race and disability discrimination cases the appropriate test for deciding whether an employer is liable to pay compensation for psychiatric injury suffered by an employee is NOT whether the injury was reasonably foreseeable but is simply whether unlawful discrimination caused it (due to distinction between "statutory torts" such as those created by the anti-discrimination statutes and "common law torts" for example the tort of negligence where the normal "reasonably foreseeability" test is relevant when deciding whether an employer is liable for injury resulting from his negligent act).

Core Knowledge Requirement – First three cases plus one other and knowledge of recent cases or any landmark cases.

c. Contractual Law

Where an employee is rendered unfit to work, through work-induced stress, the employer can be sued for breach of contract or held (in an Industrial Tribunal) to have caused constructive dismissal. This is based on the common law duty to provide safe working conditions being an implied contractual term in the contract of employment. The employee, however, is under an implied duty to adapt to new working methods, techniques or technology, given necessary training.

Morgan and Staffordshire University [2001] - shows that it is not enough for an employee merely to prove "stress" to support a tribunal claim (eg for constructive dismissal). An employee must demonstrate some form of recognised psychiatric illness if a claim is to succeed

Dunnachie v Kingston upon Hull City Council etc [2003] Employment Appeal Tribunal ruled that an employment tribunal has no power to award compensation for non-financial loss in unfair dismissal or wrongful dismissal cases. Therefore, an employee cannot recover compensation for "stress" in an unfair dismissal or wrongful dismissal case unless he can show that it resulted in financial loss (eg delay in ability to get a new job).

Core Knowledge Requirement – Up-to-date knowledge of recent case or any landmark cases.

iii. HSE Guidance on work-related stress

This section deals with the significant role of the UK Health and Safety Executive (HSE) in regulating, monitoring and advising on work-related stress. The HSE's position is developing fast, so it is important for all Stress Management Practitioners, particularly those practising in workplace settings, to keep abreast of developments. Thus, as well as being aware of the issues listed below, practitioners need to monitor the press and websites to ensure that they understand the up-to-date position.

The HSE's guidance builds on employers' statutory duties for the welfare of their staff (see Stress and the Law, section D ii).

a. Key HSE documents

- Late 20th century HSE thinking and consultations
- HSE guidance issued in 2001
- HSE campaign on stress
- HSE draft management standards on work-related stress
- HSE guidance on assessing the management standards
- Recent HSE research on work-related stress, including "Beacons of Excellence" study

Core Knowledge Requirement – All of these

b. Stress risk assessment

- Five steps to risk assessment
- HSE guidance on stress risk assessment
- Stress audits (including validity and reliability debates)
- Generic vs tailored stress risk assessment surveys
- Methods for assessing stress risk other than surveys
- Line managers' role in stress risk assessment
- Stress risk assessment as a diagnostic process
- Implementing interventions arising from stress risk assessment
- HSE Interventions Guide – ("Real Solutions, Real People")

Core Knowledge Requirement – All of these

c. Management standards for work-related stress and their measurement

- Research underlying the management standards – particularly the Whitehall II and Bristol studies
- Current form of the draft management standards
- Current recommendations for assessing whether an employer meets the management standards – e.g. First pass and second pass filter tools
- Current status of developments.

Core Knowledge Requirement – All of these

iv. Workplace stress management interventions

This section covers knowledge of the range of interventions that can be used in the workplace to prevent and manage stress. It covers primary, secondary and tertiary interventions, at both organisational and individual levels. It starts with organisational-level interventions, including diagnosis and the range of interventions available. It includes two types of workplace training: management development or training for managers on how to manage stress in their teams; and training for groups of individuals on how to manage their own stress. One-to-one coaching is also included. Tertiary interventions such as counselling and rehabilitation complete the picture.

a Primary Interventions - Organisational-level

Use of stress risk assessment (see section 2Diii) as a diagnostic process to identify sources of stress in the workplace

Organisational change management

Organisational development and participative action research

Job and work design

Stress management policies and related policies and procedures (e.g. absence management)

Health & Safety and Ergonomics

Workplace health promotion

b Secondary Interventions:

(i) Management development

Training design, delivery and evaluation

Management behaviours associated with subordinate well-being outcomes and stress

Identifying stress in staff and stress risk assessment

Tackling stress in staff

Management actions that prevent stress

Understanding legal issues associated with work-related stress (see section 2Dii)

(ii) Training for groups of individuals on managing their own stress

Training design, delivery and evaluation

Identifying stress in oneself and others

Identifying sources of stress and their impact

Behavioural, psychological and physiological strategies to prevent, tackle and manage stress (see section 2Ciii)

(iii) One-to-one coaching on stress management

Behavioural, psychological and physiological strategies to prevent, tackle and manage stress (see sections 2Ciii)

Therapeutic approaches (see section 2Civ)

Coaching models (e.g. GROW)

c. Tertiary interventions

Workplace counselling

Employee assistance programmes

Therapeutic approaches (see section 2Civ)

Role of Occupational Health

Rehabilitation of staff following periods of mental ill-health

E. CONTROVERSIES

This section outlines certain areas in which we find persistent disagreements, dilemmas and diversity of opinion.

It is important for practitioners to be aware of these questions, for three broad reasons:

- Most importantly because they lie at the heart of reflecting on the effectiveness and validity of one's own practice.
- They represent a link between academic research into, and critique of, stress and the "stress industry" on the one hand, and those who endeavour to bring their skills to practical intervention on the other.
- They are also significant as they frequently form the basis of media interest in stress and public debate regarding the stress concept.

i. The prevailing "discourse" on stress

- Critiques of current individualistic models of stress stating that they overlook issues of power, politics, historical context and sociology.

ii. Diversity of views on terms, models and effective interventions in the field of stress

- The range of different and sometimes conflicting definitions of the key terms. Some even arguing that the concept of stress has now become so muddled as to be unhelpful and that it should be abandoned.
- The range of models that has been developed to explain the process that leads to stress-related outcomes.
- Whether interventions to reduce stress really do work – the research evidence being mixed in some cases.

Core Knowledge Requirement – An awareness of the existence of (a) and (b)