Psychological Resilience: The Hidden Power (Risk?) Behind Assignee Success (Failure?)

Presentation Framework
- Relevance of international assignee/traveler psychological health
- Case study
- Managing psychological resilience
- Management of risk

Portuguese Assignees’ Health in Angola and Mozambique
Fonseca AG, Dias SS, Baptista JL, Torgal J. July 1, 2017
- Sample of 352 Portuguese international assignees
- One in five assignees reported new health problems and need of medical assistance
- 5% were hospitalized
- 64% reported general psychological symptoms
- Directors and executive managers and assignees living alone tended to report more severe psychological symptoms.

Statistics
- Approximately 20 - 30% of all international assignees are unsuccessful
- Significant number (50%) of those who do not return earlier, function at a marginal level of effectiveness
- 30 to 40% of returning assignees leave the company within six months after return
- Only 30% of companies apply a sufficiently rigorous assignee assessment and selection process
- Assignee selection mostly based on factors such as technical competency and job experience

Costs of assignments involving travel
Direct cost involved with married assignee for three years to Lagos Nigeria:
- Home salary USD140 000 per year with two children at school
- First year assignee salary (including tax in Nigeria)
- Plus benefits in Lagos (education, accommodation)
- Plus repatriation costs
- Total USD502 000
- Second year assignee salary (including tax in Nigeria)
- Plus benefits in Lagos (education, accommodation)
- Total USD450 000
- Third year assignee salary (including tax in Nigeria)
- Plus benefits in Lagos (education, accommodation)
- Plus repatriation costs
- Total USD706 000

Total for three years USD1 314 000
(Mercer, 2018)
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What changes do Global Mobility professionals expect impacting on the achievement of Global Mobility objectives over the next five years:

- Reduction in traditional long-term assignments: 40%
- Increased use of commuters, short-term assignments and business travellers: 39%
- More contingent workforce (e.g., global, flexible hires for specific projects/roles): 31%
- Increase in formal Talent Management for leadership roles: 28%
- Virtual assignments – as part of global teams: 27%
- More gender diversity (e.g., more females engaging in international assignments): 24%
- More cultural diversity (greater multi-cultural resourcing from new countries): 24%
- Increase in business-driven programmes: 21%
- Increase in employee-initiated programmes: 19%
- Increased use of independent contractors: 14%

(Santa Fe Relocation, 2018)

KEY CONCLUSION:
Assignee Psychological Health is Not a Luxury
It is a Necessity

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Examples of Psychological Stressors

<table>
<thead>
<tr>
<th>Rank</th>
<th>Category</th>
<th>Acute Events</th>
<th>Enduring Events</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>None</td>
<td>No acute events that may be relevant</td>
<td>No enduring circumstances that may be relevant</td>
</tr>
<tr>
<td>2</td>
<td>Mild</td>
<td>Completion of studies; child left home; break-up with girlfriend</td>
<td>Overcrowded living quarters; job dissatisfaction; family arguments</td>
</tr>
<tr>
<td>3</td>
<td>Moderate</td>
<td>Marriage; job loss; marital separation; retirement, etc.</td>
<td>Marital discord; serious financial problems; trouble with boss, etc.</td>
</tr>
<tr>
<td>4</td>
<td>Severe</td>
<td>Divorce; criminal assault; births of first child, unwanted pregnancy</td>
<td>Life threatening illness of patient; unemployment; poverty; move to new culture (inclus. expatriation)</td>
</tr>
<tr>
<td>5</td>
<td>Extreme</td>
<td>Death of spouse/parent; serious physical illness diagnosed; suicide of patient</td>
<td>Serious chronic illness in self or child; ongoing physical or sexual abuse</td>
</tr>
<tr>
<td>6</td>
<td>Catastrophic</td>
<td>Death of child; suicide of spouse; devastating natural disaster</td>
<td>Captivity as hostage; concentration camp experience</td>
</tr>
</tbody>
</table>

Case Study: Mr X

- Receive phone call from client 9.00 Sunday morning
- Requesting trauma counselling for a Project Executive
- Project Executive on large mining construction project
- Dubai-based mining company based in rural area of developing country
- Project Executive was involved in car accident two days ago
- One local national killed and two seriously injured
- “He seems to be ok. Not sure whether he needs talk to a Psychologist”

Case Study: Mr X – Business Environment

- Has been on project for 6 years
- Project behind schedule with 15 months
- Project delay caused by operational incident – Mr X’s area of responsibility
- Cost of incident US$47 million
- Company in litigation with Project Management Company and Insurance Company to determine who is responsible for costs
- Direct superior changed three people in the past 3 years – latest boss four months in position
- Unhealthy conflict between Dubai-based Head Office and local operations
- Individual comes across as being highly competent and in control
- “I’m OK. Not sure why I need to talk to a Psychologist”
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Case Study: Mr X - Business Environment

Climate Survey: Overall Project Team Quantitative Climate Survey Results

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Psychological Resilience: The Hidden Power (Risk?) Behind Assignee Success (Failure?)

Case Study: Project Team Organisational Reporting Lines

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Case Study: Mr X – Cultural/Social Environment

- 57 expatriates based on mining/construction site in rural area of French speaking country
- Operations in the middle of township 500 kilometres away from country capital
- Only safely accessible by means of charter plane flying in three times a week
- Company in the process of relocating local nationals from their homes
- Civil unrest
- 2 employees of subcontractor got killed
- Expatriates required to evacuate to emergency area for two nights while attacks took place
- Project Executive responsible for evacuation
- "I'm OK. Not sure why I need to talk to a Psychologist"

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Case Study: Mr X – Personal Environment

- 48 years old
- Divorced with two teenage children
- Experiencing some difficulty connecting with children
- In the process of building relationship with new girlfriend in Washington
- Not sure whether relationship will work out
- At times experiencing a few headaches
- Would like to settle down at some stage. Starting to wonder what the purpose of life is
- "I'm OK. Not sure why I need to talk to a Psychologist"

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Company Email Request: Mr X

Dear Marius,

After helping Mr X and fixing the situation, can you please provide us with a “Fit for Work” letter for him, indicating that he is OK to travel back to site? No worries. Just an admin process.

Have a great day

Best regards

The Psychology of Travel

Psychological Resilience: The Hidden Power (Risk?) Behind Assignee Success (Failure?)

Reasons for Assignee Failure
- Inability/unwillingness of spouse and family to adjust (Personal adjustment)
- Individual’s own inability/unwillingness to adjust to foreign environment (Personal adjustment)
- Inability/unwillingness to adjust to local culture and language (Cross-cultural adaptability + country-specific fit)
- Perceived inability to cope with larger foreign responsibility (Managerial + Technical Competence)

Underlying Principles and Consequences

World of Leadership
- How?
  - Emotional resilience
  - Family well-being
  - Cultural dynamics
  - Competence
  - Leadership
  - Structure
  - Team work
  - Role definition
  - Satisfaction

World of Business
- What?
  - Company purpose
  - Objectives
  - Strategy
  - KPAs & KPIs
  - Profits
  - Sales
  - Margins

The Reality
- There is no reliable way to determine in advance whether an individual will be successful as an assignee
- Too many factors having an impact on the individual’s success, many having nothing to do with the individual
- Assessment of prospective international assignee/traveller suitability can have only one realistic aim: to identify those candidates who are the most likely to fail on international assignment in a foreign country due to obvious concerns or low readiness
- Critical to make use of a systems approach in managing aspects impacting on the traveller’s performance, pre-, during and post assignment

(Van Weerdenburg, 2018); Grove and Hallowell (2018)

Importance of Utilizing a Systems Approach

What makes an assignee successful?
KEY QUESTION:
To what extent are we aware and prepared for the risks involved with being and employing global travellers?

Psychological Resilience: The Hidden Power (Risk?) Behind Assignee Success (Failure?)

Mind the gap: Mental health and insurance coverage
CISTM16 - Washington
Tullia Marcolongo, M.A.
Executive Director
Certificate in Travel Health®

No conflicts of interest to declare

Overview
Barriers to mental healthcare for travellers
• Cultural perceptions
• Psychotropic medication
• Insurance coverage | international assignees, study abroad, short-term travel
• Evacuation

Medico-legal issues for clinicians
- Medical questionnaires & fit for travel certificates
- Obligations re: travel health insurance

• DO YOU GET ASKED ABOUT TRAVEL HEALTH INSURANCE IN YOUR PRACTICE?
• DO YOU RECOMMEND TRAVEL HEALTH INSURANCE TO YOUR TRAVELLERS?
• HAVE YOU READ A TRAVEL HEALTH INSURANCE POLICY FROM COVER TO COVER?
The landscape

Culture shock
Language barriers
Jet lag
High altitude
Changes in climate
Unusual foods

Substance use
Personal safety
Metabolic disorders
Brain lesions
Trauma...concussions, diving accidents

Felkai et al. J Travel Med 2017, 1–6

The landscape

Cultural perceptions

What travellers need to know: Cultural perceptions on mental health influence quality of care

Cultural perceptions

Tell your travellers: Research and know what to do in case of a mental health emergency

Psychotropic medication

Laura:
- US student on a study trip to Ukraine, via Poland and Croatia.
- Bupropion, carbamazepine, clonazepam, lorazepam, lamotrigine, sertraline.
- Two weeks before the trip finds out that lorazepam and carbamazepine are not prescribed in the Ukraine.
- Destination Embassies give incomplete and contradictory information.
Psychotropic medication

Rebecca

- In Wuxi, China on 2-year teaching assignment.
- Amphetamine/dextroamphetamine
- Finds out on arrival that medication is not available. Gets prescription for methylphenidate, but “does not work” for her.
- Willing to travel to Hong Kong if available there.

What travellers need to know:

- Countries have quantity importation limits for controlled substances.
- Larger quantities need an importation license or a certificate.
- Medication may not be available in the host country. The dosage and brand names may differ.
- In many countries pharmacists cannot fill a prescription from a foreign doctor.
- When to take medication in transit and crossing time zones.
- How to pack medication and what documentation to bring.
- Know where to locate a reputable pharmacist. Don’t mail or courier medication!

Travel health insurance

Psychotropic medication

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Standard plan – sample #1

Standard plan – sample #2

Standard plan – sample #3
Assignees – sample #1

“This is available after two years’ membership.”

Assignees – sample #2

“Available after 12 months of continuous coverage.”

Assignees – sample #3

“Cases related to any expense incurred for emotional, mental or psychiatric illness for which the Member is receiving treatment, medication or supervision at the commencement date of the Program, or at the start of any subsequent trip.”

Assignees – sample #4

Student travel abroad

Mental health conditions in students abroad:
- Generalized Anxiety Disorder
- Attention Deficit Hyperactivity Disorder
- Depression
- Eating Disorders
- Substance Use

Student travel abroad

- n = 17,071 records
- 831 students studying abroad from
- 16,240 international assignees
- Medical assistance over 24 months
- Study abroad participants:
  - More likely to get a behavioral diagnosis
  - Less likely to be in in-patient care
  - More likely to be evacuated or repatriated

Student travel abroad

- n = 613; 9%
- Placement within 3-year period
- Assessed wellbeing, psychological symptoms, and life functioning before, during, and after placement
- 27.7% had a mental health condition prior to travel
- 8.3% experienced a mental health issue abroad
- 59% did not disclose
- 91.8% did not seek treatment abroad

Student travel abroad

- 17-23 year olds
- 3-12 months placements
- n = 88; 48% pre-trip questionnaire & n = 34; 40% post-trip questionnaire
- Psychological stressors:
  - Homesick 76.5%
  - Culture shock 52.9%
  - Difficulty communicating with locals 50%
  - 91.2% dealt with psychological stressors on their own

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Student travel abroad – sample #1

- Emergency Benefits
  - Psychiatric/Psychological Care
    - a. visits to a licensed psychiatrist, psychologist, or social worker for the relief of acute symptoms, up to a maximum limit of $250 per policy or
    - b. for hospital expenses due to psychological, mental or emotional disorders, up to a lifetime maximum of $5000
  - e. the initial visit to the physician

- Medical and Psychological issues:
  - 13 month placements
  - n = 60; 48% pre-trip questionnaire & n = 34; 40% post-trip questionnaire
  - Psychological stressors:
    - Homesick 76.5%
    - Culture shock 52.9%
    - Difficulty communicating with locals 50%
    - 91.2% dealt with psychological stressors on their own

Student travel abroad – sample #2

- Psychological care - up to $5000 for the period of a long-term psychological condition or illness
- Treatment costs for mental health issues, including hospitalization, psychotherapy, and medication costs

- Mental Disabilities
  - 15. Alcohol and Drug Abuse
    - 91.8% up to $5000

- Exclusions
  - Any mental and nervous disorders or drug use, unless otherwise covered under this Certificate
  - Learning disabilities, attention disorders, or disciplinary problems
What travellers need to know

• If mental health is covered:
  • Are first time mental health emergencies covered?
  • Are the maximum benefit amounts enough for treatment?
  • Are there any preconditions that need to be met before receiving coverage?
  • Is there only outpatient treatment or is hospitalization an option?
  • What is the length of treatment coverage?

Tell your travellers:
If mental health is not covered (or not adequately covered), change carrier as soon as possible or get a better plan.

Evacuation

B.C. woman injured in California warns of need for proper travel insurance

“In a perfect situation it could be within a day but in some cases we’ve seen it take up to one week or two weeks depending on where the patient is being brought back to.”

Evacuation

Medical evacuation applies where the necessary treatment for which the insured person is covered is not available locally, or if adequately screened blood is unavailable in the event of an emergency. We will evacuate the insured person to the nearest appropriate medical centre (which may or may not be located in the insured person’s home country). By ambulance, helicopter or airplane. The medical evacuation, which should be requested by your physician, will be carried out to the most economical way considering the medical condition. Following completion of treatments, we will also cover the cost of the return trip, at economy rates, for the evacuated member to return to his/her principal country of residence.

“We will evacuate the insured person to the nearest appropriate medical centre… in the most economical way”

What are your obligations?

Insurance policies are legal contracts. Terms and conditions must be adhered to in return for coverage.

• Should you be tasked to complete a medical questionnaire or provide a ‘fit for travel’ guarantee at the risk of being liable?

• Are you obligated to tell travellers about potential loopholes that may affect their medical coverage abroad?

The medical questionnaire

<table>
<thead>
<tr>
<th>Medical Questionnaire</th>
</tr>
</thead>
<tbody>
<tr>
<td>Name</td>
</tr>
<tr>
<td>Age</td>
</tr>
<tr>
<td>Address</td>
</tr>
<tr>
<td>City</td>
</tr>
<tr>
<td>Province</td>
</tr>
<tr>
<td>Country</td>
</tr>
<tr>
<td>Phone number</td>
</tr>
<tr>
<td>Email</td>
</tr>
<tr>
<td>Emergency contact</td>
</tr>
<tr>
<td>Travel insurance</td>
</tr>
<tr>
<td>Medical condition</td>
</tr>
<tr>
<td>Treatment location</td>
</tr>
<tr>
<td>Treatment date</td>
</tr>
<tr>
<td>Medical evacuation</td>
</tr>
</tbody>
</table>

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6/8/2019
The medical questionnaire

Ambiguous language

• “moderately severe or severe”
• “including but not limited to”
• “have you ever had”
Mental health: "emotional or nervous condition"  
"mental disturbance"  
"affective disorders"

The medical questionnaire

Be aware of ‘yes’ or ‘no’ questions
They do not allow for nuances
Provide as many details as possible
Do not hesitate to write more information than requested

The medical questionnaire

Know the definitions
An insurer’s medical terms may not be the same ones commonly used by clinicians

The medical questionnaire

Misrepresentation
(an honest mistake or willful omission)
Can put you and your patient at financial risk

The medical questionnaire

Be ready to give insurers the patient’s file
Insurers will review the patient’s file against the answers on the medical questionnaire before approving a claim

Post-claim underwriting

When an insurer waits until after the insured makes a claim to determine whether the claimant is eligible for insurance according to the risk the person presents.
Crowell & Moring LLP, 2008
The insurer can retroactively deny coverage for inaccuracies or omissions in the medical questionnaire
Recommending travel health insurance

- Know the basic limitations and exclusions on mental health
- Recommend insurers that adequately cover mental health
- Be ready to help patients during the application and claims process

Tell your travellers: Read all the fine print, get answers from the insurer, and find a plan that adequately covers mental health.

Thank you!

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Psychological Health is Not a Luxury: Building Resilience

An International Assignee Case Study: Reflections from a Physician and His Family

7 June 2019

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Marius van Aswegen
Fanie Jute

An International Assignee Case Study: Reflections from a Physician and His Family

No conflicts of interest to declare

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An International Assignee Case Study: Reflections from a Physician and His Family

- Globalization
- International assignment – a growing reality
- Employees more mobile
- Average duration of assignments is shortening
- Male, 30 – 50 years old

Extreme remote, developing environment to urban environment in developed country
"The Expat World"

- South African family – parents & 3 children
- 15 years abroad – 5 countries
- Recently re-assigned to 6th country (btw this is SA..)
- Environmental changes
  - Professional
  - Socio – cultural
  - Personal
- Cross cultural awareness, interaction and understanding the world
- Social interaction and relationships
- Flexibility & Emotional resilience
- New languages – French, Bahasa, Swahili, Arabic

Psychological Health is Not a Luxury:
Building Resilience

"The Expat World"

- Stressors in a remote foreign environment
  - Medical
  - Schools & University
  - Relocations, “departure stressors” and “saying good byes”
  - Contract renewals and continuous on-call duties
  - Pets
  - Travel & Airports
  - Personal safety

- Surviving tools
  - School
  - Medical insurance / assistance coverage
  - Church
  - Work cycles
  - Continue to communicate in home language
  - Have a “base” in home country - Christmas break / long summer holidays
  - Stay in touch with family - Email / Skype / Frequent visits by family members

- Foreign cuisine however continued to enjoy SA traditions
- Vacations - travel to new and interesting destinations
- Relocations
  - Saying good byes
  - Associated with educational demands of children; family agreement and detailed planning
- Emergency contingencies
  - International multi-cultural school in SA
  - Counselling

"A Third Culture Kid (TCK) is a person who spends a significant part of his or her first eighteen years of life, accompanying parents into a country or countries that are different from at least one parent’s passport country due to parent’s choice of work.

- "Third Culture Kids: Growing up Among Worlds" - By David C. Pollock, Ruth E. Van Reken, Michael V. Pollock
- "Looking for Mrs Livingstone" - By Julie Davidson

The TCK frequently builds relationships in all of the cultures, while not having full ownership in any. Although elements from each culture may be assimilated into the TCK’s life experience, the sense of belonging is in relationship to others of similar background.”

THE PSYCHOLOGY OF TRAVEL

Psychological Health is Not a Luxury: Building Resilience

Questions?