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# Connecting Caring Responsibilities, Self-Care & Organisational Duty of Care in Peace Operations

## *Policy Brief*

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This Policy Brief draws from the findings of the research project *Advancing the Meaningful Participation of Women in UN Peace Operations by Supporting Personnel with Caring Responsibilities*, funded by the Global Affairs Canada (GAC) as part of the Elsie Initiative for Women in Peace Operations (2023-2026).<sup>i</sup> Research draws from interviews and a global survey with peacekeepers and other uniformed personnel, as well as civilians engaged in or impacted by peace operations. There are 553 research participants (257 interviewees and 296 survey respondents), representing 63 countries. Where gender and roles are known, 65% of research participants are women (35% men) and 84% are uniformed personnel (armed forces and police).

Interviews were conducted online and across seven country sites: 3 x Troop and Police Contributing Countries (T/PCCs - United Kingdom, India and Indonesia); 3 x UN peace operations – UN Mission in the Republic of South Sudan (UNMISS), UN Multidimensional Integrated Stabilisation Mission in the Central African Republic (MINUSCA) and UN Organisation Stabilisation Mission in the Democratic Republic of the Congo (MONUSCO); UN HQ (New York).

Drawing from extensive research across peacekeeping missions and T/PCCs, this brief demonstrates a direct positive correlation between organisational support for personnel with caring responsibilities and their overall well-being, with both integral to organisational duty of care and with significant implications for performance, capability and mission outcomes.

### **Caring Responsibilities and Unpaid Care Work**

Recognising that the terms “caring responsibilities” and “unpaid care work” are not universally used or understood, for the purpose of this Report, caring responsibilities refers to the essential, usually unpaid, activities that care-givers undertake for others, and themselves, in response to a specific need. These responsibilities typically involve caring for children and other family members, including family members who are ill, disabled or elderly. Activities can include cooking, housework and providing physical and personal care for someone, such as helping someone get dressed, bathe or eat. The term care work – or unpaid care work – is often used to refer to these activities and gives credence to the argument that care work is labour rather than simply “help”.

## **Organisational Duty of Care and Organisational Attentiveness to Care**

Organisational duty of care entails an obligation to take reasonable steps to protect the safety and well-being of personnel, including personnel with caring responsibilities. It is not only a moral obligation — it is also smart organisational practice. Exercising duty of care benefits staff well-being, enhances productivity and operational effectiveness, improves organisational credibility, strengthens retention and recruitment, and can reduce financial costs associated with under-performance, attrition, sick leave and disability pension claims.<sup>ii</sup> In peace operations and more broadly in the security sector, duty of care is especially critical as it can save lives.

There is a deep synergy between duty of care, organisational support for personnel with caring responsibilities, and the self-care and well-being of personnel. Organisations that exercise their duty of care are more likely to provide support for personnel with caring responsibilities. That support, in turn, enables self-care by reducing stress, making help-seeking possible and building a culture that values well-being.

*We are not robots... We are people with emotions. How can we care for others when peacekeeping if we don't have systematic support in achieving that balance to care for those who are part of our life? (female military officer from Bosnia and Herzegovina, online, 10/05/2024)*

## Connection Between Organisational Support for Personnel with Caring Responsibilities and Well-Being

The majority of survey respondents (82%) agreed that women with care responsibilities should be supported in security institutions, and that this support can positively impact personnel's well-being. Most survey respondents (71%) also agreed that there is a connection between organisational attentiveness to the needs of personnel with caring responsibilities and organisational responsiveness to staff well-being. When organisations are attentive to care responsibilities, they are more likely to be attentive to the well-being of all staff.

*... the better the understanding/support of the employer towards an employee with caring responsibilities the higher the staff wellbeing (reduced stress in terms of organisation of private and working life). (survey respondent)*

Conversely, managing caring responsibilities alongside demanding work in security sector institutions can compromise well-being without organisational and other support. These effects can be intensified when deployed.

## High-Stress Operational Environments and Well-Being

UN peace operations are high-stress environments with the potential to adversely impact well-being without sufficient support. Paradoxically, peace operations demand high levels of well-being to manage the challenges of a complex, dynamic and often insecure environment. Frequent heavy workloads, exposure to violence and trauma, and dealing with vulnerable, traumatised populations can further challenge mental health. Likewise, the poor living conditions that can characterise peace operations compound these challenges.

*... they are not giving them internet. They're not giving them possibility to visit a family. Nothing for one year is extremely challenging, difficult, and I have seen some contingents living in difficult conditions in the middle of nowhere. No AC, no good toilet, nothing. (male civilian in MINUSCA, 24/10/2024)*

Family separation is another key – yet overlooked – stressor on peace operations. The potential threat this poses to well-being is intensified when there is poor internet connectivity and limited support to travel home during R&R on long deployments, to enable peacekeepers to keep in touch with family members and support networks. Adverse impacts on well-being can be compounded by feelings of guilt and worry about the welfare of family members while deployed.

For women peacekeepers, feelings of guilt and the social stigma associated with expectations that women should be at home providing care for children or fulfilling other caring responsibilities can exacerbate the psychological strain that can arise on mission. A peacekeeper in UNMISS referred to some personnel with caring responsibilities on peace operations “falling into depression because of the fear of balancing or the fear of losing one... over the other.” (Female military peacekeeper, UNMISS, 04/07/2024) Another referred to a colleague who was “crying everyday” because she had left their children at home and couldn't afford a flight ticket to visit them.

## Why Self-Care and Well-being Matter in Peace Operations

When self-care is neglected and organisations are inattentive to care, it is not only individual peacekeepers who are harmed. Workplace cultures and operational outcomes can also suffer. This is because of risks associated with negative coping mechanism, burnout and attrition, safeguarding concerns, and compromised performance and mission outcomes.

### ⇒ Mental Health Stigma and Negative Coping Mechanisms

There is a stigma associated with mental health, especially among men and in male-dominated institutions such as the security sector and peace operations. This stigma demotivates people from seeking help. It can also lead personnel to deprioritise their own well-being and sometimes rely on negative coping mechanisms. Heavy workloads and the importance of the work being done can also add further pressure onto peacekeepers and disincentivise them seeking help:

*Yeah, so maybe because the stigma attached it. But also for me, I look at the number of emails I get in, who's gonna do your job? No one's going to do it... we don't have the team support around us for that. (British female military officer, New York, 21/10/2024)*

Lack of self-care and insufficient support to deal with mental health impacts can lead to reliance on alcohol, overworking or other negative coping mechanisms. A work culture that does not encourage self-care or support-seeking feeds this cycle. Deprioritising well-being and reliance on negative coping mechanisms can also contribute to high-rates of burn-out, disengagement, and attrition.

### ⇒ Burnout and attrition

Many peacekeepers know colleagues who have "burned out" from exhaustion and lack of work–life balance, or who have left the service or decided not to re-deploy because of mental health issues linked to sustained stress and strain on family relationships. For instance, almost half of the women (45%) and over a third of the men (34%) surveyed said that they have had to leave or change their work in the security sector because of their caring responsibilities.

Similarly, in the UK's Armed Forces Continuous Attitudes Survey, the impact of Service on family and personal life is continuously the top factor influencing intentions to leave.<sup>iii</sup> Likewise, the UN's 2024 Report *Towards Equal Opportunity for Women in the Defence Sector*<sup>iv</sup> highlights that among the 35 participating Member States, an ongoing "lack of support to parenting and family life" is the most highly cited barrier to women's recruitment, retention and promotion in the military.<sup>v</sup> The same is the case for police institutions, where personnel struggle to find childcare and manage both professional and caring work responsibilities because of long, unpredictable and unsociable hours and frequent relocation.<sup>vi</sup>

At the organisational level, high rates of attrition among women represent a significant loss of investment, skill and experience, with implications for organisational capability and diversity.

*... you already have a physically or emotionally demanding home, you know, personal environment, and then on top... a physically and emotionally demanding environment. At work, 100% of your life is filled with stress. And so, if you don't find ways to decompress, you're going to implode... the challenge is to look after yourself before, you know, constantly, and having the capacity and the support system to do that, otherwise, it's very easy to just burn out.*<sup>vii</sup>

*... there has to be [support and] allowances made... otherwise you will just lose very good people... I've seen that first-hand where people have gone down rabbit holes... And not only do they leave the service, but they leave with significant, in some cases, mental health challenges, and that really is, is something that everyone will be keen to avoid (British male military officer, New York 15/10/2024).*

### ⇒ Safeguarding concerns

In operational contexts characterised by high levels of stress, such as peace operations, organisational inattentiveness to well-being can contribute to safeguarding concerns.

Stress, exhaustion and a reluctance to seek help for mental health concerns can influence decision-making and behaviours. This can have severe repercussions on peace operations. In extreme cases, it can contribute to self-harm and harmful behaviours towards others, including fellow peacekeepers or people living in mission areas.

These risks are heightened where personnel rely on negative coping mechanisms and where well-being and self-care are not prioritised in the mission. Some research participants linked harmful behaviours to high-stress operational environments, harmful workplace cultures and very poor mission facilities and living conditions:

*... they are treated really badly. They're fed badly. They... live in a shum. They don't get resupplied for months on end because they are 1000 miles into a rainforest with no adequate supplies... And then they don't have Wi Fi, so they can't speak to their families... So, I think we put people into incredibly difficult like dystopian situations, and then expect them to behave like an angel (211024UN\_Mx2\_MIL\_UK MILAD & Police Advisor in UK Mission to UN).*

Others highlight the long-lasting impact that lack of attention to well-being can have on personnel and their families, contributing to risks such as PTSD and fracturing of family relationships: Statistical data points to a higher rate of suicide among serving and former police<sup>viii</sup> and military personnel than among the general population in several countries, including Australia<sup>ix</sup> and the US.<sup>x</sup> The Final Report of the Royal Commission into Defence and Veteran Suicide (2024) also refers to family separation and disruption, including due to deployments and relocations, as a unique occupational stressor facing personnel in the Australian

Defence Force (ADF), which can contribute to suicide risk factors. Many personnel, in both the armed forces and police, have been deployed or relocated frequently or at short notice, which intensifies stress for both personnel and families.

*... high levels of stress, bad culture, alcohol use, substance abuse and then bad behaviour... better self-care, better attention to caring responsibilities would mean less like maladaptive coping practices, which would then lead to less kind of internal abuse and probably external harassment as well. (female civilian working in peace operations, online 06/12/2024)*

⇒ Reduced performance and suboptimal operational outcomes

Inadequate self-care and organisational inattentiveness to well-being can lead to increased levels of stress, aggression, frustration, detachment and hyper-vigilance. In turn, this can have direct implications for performance. As one peacekeeper put it simply: "if my back of the mind is clear and out of the stress, then obviously I'm going to be more efficient in my work." (Female military peacekeeper, UNMISS, 06/07/2024)

When organisations effectively support care and well-being, the reverse is true: personnel report greater improved performance and better mission outcomes. As one survey respondent summarised, "happy staff, better results" and as a peacekeeper in MINUSCA emphasised: "Without health and well-being, we cannot perform our work effectively" (MINUSCA).

Decent living conditions and the ability to communicate with families while on mission were highlighted as critical to well-being and performance.

*I can't reach them. I don't know what's going on. All of these things [are] super stressful and impacts your ability to do the work effectively" (UN staff officer referring to the stressors facing women peacekeepers, New York 30/10/202).*

*... if my back of the mind is clear and out of the stress, then obviously I'm going to be more efficient in my work, so we all should be attentive about [supporting personnel with caring responsibilities]" (female military peacekeeper, UNMISS, 06/07/2024).*

*The private life has a big impact on the wellbeing, even if you are on a mission, your private life is not on a pause. So, if your private life is well functioning, you will have better opportunities to contribute to the work you are doing in the mission. (survey respondent)*

## What Needs to Change

The risks that can arise from lack of attention to well-being underscore the critical importance of self-care, support networks, the availability of mental health and psychological support services (MHPSS) and stigma reduction to encourage personnel to seek help when needed. This needs to happen on mission as well as before and after deployment, with the principles of care embedded into the work culture of armed forces and police.

### Frameworks, Structures and Resources to Support Well-being

A range of tools and resources exists to support the well-being of personnel before, during and after deployment, though availability and quality vary across T/PCCs and missions. While T/PCCs bear primary responsibility for the welfare of their deployed personnel, other stakeholders play a critical role, notably the UN, and individual personnel, particularly leaders. Key areas of support include:

#### **Pre-deployment:**

- Pre-deployment training should address stress management, family separation and self-care strategies — not only technical and operational skills. Some T/PCCs ask what supports personnel with caring responsibilities have in place or may need, update family care plans, and provide counselling to help personnel prepare.
- Personnel should be briefed on what MHPSS and welfare support will be available to them and their families when they are on mission – as well as pre- and post-deployment – and how to access it.

#### **During deployment:**

- Adequate living conditions are essential for peacekeepers' well-being, particularly given the stressful and sometimes hostile environment, which can involve heavy workloads and

involve personnel to trauma, combined with the stressor of family and home separation. Basic amenities, including a good bed and separate sanitation facilities are essential.

- Some missions provide recreational facilities, mental health days, and access to psychological counsellors, which are invaluable in supporting well-being. The provision of recreational amenities and welfare facilities help provide personnel with the space and ability to decompress – essential on stressful missions.
- Internet access — or other means of communication with family and friends — is one of the most critical welfare tools for deployed personnel to remain connected to families and other support networks.
- Support for personnel to travel home during R&R on long deployments can also make a significant difference to peacekeepers' well-being.

#### **Post-deployment:**

- Post-deployment support varies significantly between T/PCCs. Best practice includes psychological debriefing, reintegration counselling and extended psychosocial support for personnel and their families. For example, the Canadian Armed Forces provide 3-day post-deployment debriefing sessions that include social worker appointments and structured decompression time before personnel return home.

Across the deployment cycle a number of other priorities are recommended, including:

- ⇒ Investment in psychosocial support pre-, during and post-deployment, with effort to ensure T/PCC and UN initiatives are rolled out to and across all field missions.
- ⇒ Development and communication of supportive human resource policies (including parental and emergency leave, and compassionate postings).
- ⇒ Development and delivery of awareness campaigns to de-stigmatise care – both caring responsibilities and self-care or mental health help-seeking. This should include efforts to address maternal bias – ungrounded assumptions that mothers lack capabilities and commitment that can hamper their deployment prospects and career progression – as well as raise awareness of and support for the caring responsibilities of uniformed men.

## Responsibilities of Leaders

Many participants underscored the importance of strong, caring leadership. This is to strengthen duty of care, better support personnel with caring responsibilities and, more broadly, support the well-being of all personnel. Many military and police leaders we interviewed and surveyed gave examples of caring leadership:

*A Canadian military officer said: "pay attention to military families because... it's the right thing to do [and] if you're not embedding that in your in your leadership philosophy, then I think that probably failing as a leader... that ability to care for your people, and what they hold dear, and what their day-to-day stressors are then that's a really important leadership trait, too."*

*A British military officer described supporting personnel through "a tailored and nuanced approach": "... that person may be there for the tasks you give them; enable them to have downtime when they can call their family... deployed leaders and commanders need to be empowered to make the right decisions for their people."*

*An Indian military officer described his role: "[we] cannot imagine the kind of problems that these people have... So, I put myself into the shoes of a soldier to see what is the potential problems in his family... what can I do to eliminate those problems; land issues, admission of school children, anything like that which I can touch base upon, I would be happy to do it."*

*An Indian police officer explained operational benefits: "... if you expect a burnt out person to negotiate a roadblock or a law and order, I think that they would fail because they are burnt out... when they looked at the outcomes, I think I have had more achievements than any of my male counterparts, just because I was more human about it."*

Investing in care positively impacts organisations and operations by bolstering retention and performance, diversity and effectiveness, operational success, and values-based leadership:

***Retention and Performance:*** *A Canadian military officer stated: "if you want the best talent... which links to your capability... you have to invest in these things." An Indian military offer said: "you want the person who is deployed in the best mindset; to be able to discharge his duties."*

**Diversity and Effectiveness:** *A male police officer explained: "if you do not have gender inclusiveness in these institutions, you find that the community you intend to serve, doesn't get to have the required services from an institution. And it costs reputational damage to the institution... if you are not getting support from the community, you can never be effective."*

**Operational Success:** *An Australian military officer emphasised: "If people are the most important asset to drive the capability then the welfare of them, and the welfare of their families... is a fundamental input to capability... How can we expect them to perform at their best if they're not having those aspects of their life... not necessarily certain and stable and cared for."*

**Values-Based Leadership:** *a civil society actor with experience working with security sector institutions and UN peace operations said: "... we need to invest more in [and] value more care responsibilities... because who do we want as leaders in our security? We want empathetic people. We want people who can listen, who can understand... who can negotiate and communicate well, who are sensitive... we want people who are strong and enduring and patient, decisive [and] also in the caring function."*

Recommendations for leaders at all levels:

- ⇒ Communicate clear commitment to well-being and support for personnel with caring responsibilities.
- ⇒ Model help-seeking behaviour and de-stigmatise mental health support.
- ⇒ Exercise empathy and responsiveness to individual circumstances.
- ⇒ Tailor deployment management to accommodate individual needs while maintaining operational effectiveness.
- ⇒ Enable personnel to have downtime to connect with families.
- ⇒ Monitor living conditions and advocate for improvements.
- ⇒ Build awareness of the challenges faced by personnel with caring responsibilities, and the gendered drivers and impacts.

## Conclusion

This policy brief demonstrates a clear, direct, positive correlation between organisational support for personnel with caring responsibilities and their overall well-being. When organisations are attentive to care responsibilities, they are more likely to be attentive to the well-being of all staff, creating a synergistic, mutually-reinforcing relationship between duty of care, organisational attentiveness to care responsibilities, and self-care.

The consequences of inattentiveness are severe: mental health challenges, negative coping mechanisms, burnout, attrition, safeguarding concerns, compromised performance, and damaged mission legitimacy. Conversely, attentiveness yields substantial benefits: improved well-being and performance, enhanced workplace cultures and safeguarding, greater gender diversity, more effective peacekeeping outcomes, development of empathetic leaders, and cost savings.

*...\_better support for people's well being, pre deployment, during deployment and afterwards, might actually positively impact the way in which troops conduct themselves... talking about provision of emotional support or counselling or care is incredibly important, (211024UN\_Mx2\_MIL\_UK MILAD & Police Advisor in UK Mission to UN)*

*This is a vital part of management responsibilities and without providing good staff wellbeing and care needs we are not doing our job. If we provide good wellbeing and care, we have more effective staff who are able to manage their caring duties as well. (survey respondent)*

Organisational duty of care is therefore not only a moral and legal obligation but also a strategic imperative for effective peacekeeping. T/PCCs have primary responsibility for personnel on peace operations, yet the UN and other stakeholders – including individual personnel and leaders – can and must do more to create an environment that better supports peacekeeper well-being, including by recognising and supporting the needs of personnel with caring responsibilities.

Greater attentiveness to care in UN peace operations is not just about supporting women with caring responsibilities – although that is essential. It is about creating peacekeeping forces that are healthier, more diverse, more effective, and better able to fulfil their mandate to maintain

peace and security. It is about recognising that care – for oneself, for family, and for others – is not separate from or in opposition to peace and security work, but rather fundamental to it.

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<sup>i</sup> Global Affairs Canada (2026) *Elsie Initiative for Women in Peace Operations*. Government of Canada website. [https://www.international.gc.ca/world-monde/issues\\_development-enjeux\\_developpement/gender\\_equality-egalite\\_des\\_genres/elsie\\_initiative-initiative\\_elsie.aspx?lang=eng](https://www.international.gc.ca/world-monde/issues_development-enjeux_developpement/gender_equality-egalite_des_genres/elsie_initiative-initiative_elsie.aspx?lang=eng).

<sup>ii</sup> UN (2023) *United Nations System Mental Health and Well-being Strategy for 2024 and Beyond*. New York: UN. [https://www.un.org/sites/un2.un.org/files/un\\_system\\_mental\\_health\\_and\\_well\\_being\\_strategy\\_for\\_2024.pdf](https://www.un.org/sites/un2.un.org/files/un_system_mental_health_and_well_being_strategy_for_2024.pdf); UN CEB (Chief Executives Board for Coordination) (2023) *UN System Mental Health and Well-being for 2024 and Beyond Strategy*, 22 September 2023; CEB/2023/HLCM/30. [https://unsceb.org/sites/default/files/2023-11/CEB.2023.HLCM\\_30%20-%202024%20and%20beyond%20UN%20System%20Workplace%20Mental%20Health%20and%20Well-Being%20Strategy.pdf](https://unsceb.org/sites/default/files/2023-11/CEB.2023.HLCM_30%20-%202024%20and%20beyond%20UN%20System%20Workplace%20Mental%20Health%20and%20Well-Being%20Strategy.pdf).

<sup>iii</sup> UK Government (May 2024) *Armed Forces Continuous Attitude Survey: 2024*. London: Ministry of Defence, 23 May 2024. <https://www.gov.uk/government/statistics/armed-forces-continuous-attitude-survey-2024>.

<sup>iv</sup> UN (2024) *Towards Equal Opportunity for Women in the Defence Sector*. New York: UN. [https://www.un.org/ssr/sites/www.un.org.ssr/files/general/dpo\\_women\\_in\\_defence\\_web.pdf](https://www.un.org/ssr/sites/www.un.org.ssr/files/general/dpo_women_in_defence_web.pdf): 35.

<sup>v</sup> UN (2024) *Towards Equal Opportunity for Women in the Defence Sector*: 15.

<sup>vi</sup> Valmari, E.G., Nygren, U., Ghazinour, M. and Gilenstam, K. (2023) 'How Police Officers Juggle Work, a Life Partner, and Kids: A Review of the Challenges of Parents in Police Work.' *Frontiers in Psychology* 14. doi: 10.3389/fpsyg.2023.1178314; Yu, H. H. (2019) 'Work-Life Balance: An Exploratory Analysis of Family-Friendly Policies for Reducing Turnover Intentions Among Women in U.S. Federal Law Enforcement.' *International Journal of Public Administration* 42(4): 345–357. doi: 10.1080/01900692.2018.1463541.

<sup>vii</sup> Female civilian working in UNMISS, interviewed 29/7/2024 (Monash GPS project).

<sup>viii</sup> Violanti J.M., Charles L.E., McCanlies E., Hartley T.A., Baughman P., Andrew M.E., Fekedulegn D., Ma C.C., Mnatsakanova A., Burchfiel C.M. (2017) 'Police stressors and health: a state-of-the-art review.' *Policing* 40(4): 642-656. doi: 10.1108/PIJPSM-06-2016-0097.

<sup>ix</sup> Royal Commission into Defence and Veteran Suicide (2024) *Final Report*. Canberra: Australian Government 9 September 2024. <https://defenceveteransuicide.royalcommission.gov.au/publications/final-report>.

<sup>x</sup> Ramchand, R. and Montoya, T. (2025) 'Suicide Among Veterans,' *RAND*, 22 May 2025. <https://www.rand.org/pubs/perspectives/PEA1363-1-v2.html>.