UNDERSTANDING & COPING WITH TRAUMATIC STRESS
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ONLINE TRAINING MODULE ONE
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INTRODUCTION | Stress & Humanitarian Work

“For seven years I lived among those whose lives had been torn in pieces by rockets, mines, executions, rape, torture and an unspeakable climate of fear that could shatter the insanity of any human mind. As I worked in the wars and post-war situations in Afghanistan, the Balkans, Cambodia, and the Democratic Republic of Congo, I found myself in environments for which no human being is prepared. These are extreme situations, invoking our survival instincts, expecting us to tap into our ultimate capacities of strength and courage...When you see the immense suffering of those you are attempting to help, you are morally and emotionally compelled to put aside your own fears. Temporarily. You function under pressure in the present by postponing your relief to the future. That kind of pressured living and working builds tensions within that will have to be released at some point...”

— Yasmin Sherif, on her work with the United Nations
(quoted in Danieli, 2002, p.62)

Humanitarian workers come in many shapes and sizes. They work in on-site recovery and relief missions, education, health training, agricultural assistance, community mobilization, economic development, water and sanitation, conflict resolution, and advocacy. The common thread across these diverse roles is a service-orientation in the face of suffering and need. Everyone who works for a humanitarian organization is a helper in some capacity.

The traditional image of helpers is that they are selfless and tireless. They, themselves, tend to expect that because their work is for a noble cause, they will somehow be immune to pressure. However, humanitarian workers are impacted by their work. They often leave at the end of the day feeling that they have not done enough because the scope of the need is so overwhelming. They can be troubled by witnessing violence and poverty, and by hearing the stories of refugees and disaster survivors. In addition, in today’s global climate, many face danger during the course of their work. In this service-oriented profession, many humanitarian workers struggle to find a healthy balance between the demands of the work and the need to pay some attention to their own physical and emotional well-being.

Too often, humanitarian workers consistently fail to pay any attention to their own self-care and well-being. Humanitarian work can be demanding, both physically and emotionally, and those who neglect their own needs eventually find themselves paying the price. They get sick more easily, and stay sick longer. They feel tired, drained, and worn out. They may start to feel anxious, cynical or hopeless. Relationships suffer. They can start to act in ways that hurt themselves by using drugs, alcohol, or engaging in risky behavior. In the end, those who decided to do humanitarian work to help others can end up hurting themselves and those around them.

Humanitarian workers can be supported in several ways that reduce the likelihood of developing stress-related problems. The first type of important support is to provide basic information about stress, trauma, normal reactions to stressful situations, and helpful coping strategies. Every humanitarian worker should understand traumatic stress and know how to help prevent or alleviate traumatic stress reactions. Knowledge about
normal reactions to stressful situations, and action regarding healthy self-care practices, work together to protect physical and emotional well-being. Enhanced well-being means that humanitarian workers remain happier, healthier and more effective in their work, longer.

This is the first in a series of online training modules produced by the Headington Institute that explore various aspects of traumatic stress as it relates to humanitarian work.

This introductory module aims to help humanitarian workers:

1. Understand the different types of traumatic stress associated with their work
2. Recognize the signs of stress and burnout
3. Learn self-care techniques to help alleviate stress reactions

By the end of this module you will better understand:

- The nature of traumatic stress
- Three common types of traumatic stress associated with humanitarian work – critical incident stress, vicarious trauma, and chronic stress
- The effects of traumatic stress
- Why it is important for humanitarian workers to know about these effects
- How to monitor your own well-being
- Self-care techniques to help alleviate stress reactions
- Where to get more information for continued learning or personal assistance

Of course, this study module is not a comprehensive treatment of the subject of humanitarian work and stress and trauma. Instead, this module provides an overview of critical incident stress, vicarious trauma, and chronic stress. It provides a framework for a study program that can help those interested in the subject learn about it at their own pace and enhance their understanding with additional resources. This introductory module focuses primarily on chronic stress, burnout, and self-care strategies. Additional online modules in this series focus more specifically on:

Trauma and critical incident care
Re-entry issues and work-life balance
Coping with vicarious trauma
Humanitarian work, traumatic stress and spirituality

As you work through the study sections in this module, take the opportunity to reflect on how the information presented is relevant to your work and life. Personal reflection questions have been provided at the end of each study section to help you through this process. You may find it particularly helpful to write down your answers to these questions.

When you have gone through all the lessons in this module, try testing your comprehension by taking the online quiz.
PART ONE | How can Humanitarian Work be Stressful?

Humanitarian work can be among the most exciting, enriching and important work in the world. It has:

- **MORAL APPEAL:** It is usually service work for worthy causes.

- **PERSONAL APPEAL:** Working internationally and being exposed to different cultures stretches and challenges individuals to grow.

- **ADVENTUROUS APPEAL:** Humanitarian workers often serve in the midst of extreme and challenging situations.

Facing the challenges of working in the humanitarian field can be stimulating and richly rewarding, both personally and professionally. However, with rewards can come some personal costs that result from living and working in the midst of disastrous, violent situations and facing challenges that often seem overwhelming. Some of the pressures associated with humanitarian work include:

- **THREAT & VIOLENCE:** Whether it is the result of natural disaster, civil conflict, or increased domestic crime, many humanitarian workers witness violence and its aftereffects, or are exposed to upsetting stories of personal tragedy.

- **SOCIAL DISLOCATION:** Many humanitarian workers experience separation from their social support networks, such as friends and family.

- **CULTURAL DISLOCATION:** Living and working in another country often means that new rules for communicating politely and effectively must be learned.

- **SPIRITUAL DISLOCATION:** Separation from familiar religious frameworks, exposure to radically different views about spirituality and religion, and exposure to traumatic events can challenge and alter a humanitarian worker’s religious beliefs.

- **POVERTY & DEPRIVATION:** Humanitarian workers often live and work in the midst of extreme poverty and its associated suffering without enough resources available to combat the problems. This can lead to feelings of impotence and being overwhelmed.

- **MORAL DILEMMAS:** Humanitarian work may involve facing moral dilemmas such as negotiating with warlords, concern that aid may be prolonging a conflict, or witnessing human rights violations but being unable to respond due to operational considerations.

- **THE WORK ENVIRONMENT:** Common work stressors include: interpersonal and culturally-based conflict among team members who are forced into prolonged closeness and interdependence; role ambiguity; lack of appropriate resources, personnel, time, logistical support, or skills to do the job expected; and heavy workload and long hours.
For personal reflection...

- What do you find especially rewarding about working in the humanitarian field?
- What do you find especially challenging (physically, emotionally, mentally, spiritually and relationally) about working in the humanitarian field?
- How do you find yourself reacting to some of the challenges you have listed?
PART TWO | Key Concepts Regarding Traumatic Stress

Stress can be defined as any demand or change that the human system (mind, body, spirit) is required to meet and respond to. Stress is therefore a part of normal life. Without challenges and physical demands, life would be boring. Stress, however, becomes distress (or traumatic stress) when it lasts too long, occurs too often, or is too severe. It is also important to note that what is distressful for one person may not necessarily be distressful for another. Your individual perception (how threatened you feel and how much control you have over the circumstances) can affect the degree of distress you personally feel. Traumatic stress can therefore be defined as the reaction to any challenge, demand, threat or change that exceeds our coping resources and results in distress.

There are three main types of traumatic stress to which humanitarian workers are exposed:

Critical incident stress or acute stress

Definition: These are two terms used to refer to trauma reactions that occur as the result of a traumatic event during which an individual is seriously threatened by harm or death. These types of events are often referred to as critical incidents and are unusual and intense. Examples of critical incidents that humanitarian workers may experience include being assaulted, being in situations where many people are dying, being within range of gunfire, or experiencing car accidents, bombings, kidnappings and carjackings.

Reactions: Experiencing acute stress reactions (also referred to as critical incident stress reactions) after a critical incident is a normal response to an abnormal situation. The traumatic event triggers an intense “fight or flight” response that results in a series of approximately 1500 biochemical reactions in the body. For example, sharp increases in the levels of stress chemicals such as adrenaline and cortisol lead to an increased heart rate and changes in blood flow as you prepare to deal with the threat.

Who is at risk? This type of traumatic stress tends to be more problematic for humanitarian workers who are posted outside the developed world. Research suggests that most workers “in the field” will experience at least one seriously disturbing or frightening incident during the course of their work. Approximately 25% of humanitarian workers in complex humanitarian emergency situations (e.g., working in countries such as Iraq, Afghanistan and the Democratic Republic of the Congo) can expect to undergo a life-threatening experience.

For more on detailed information on trauma and critical incident stress see our online training module, Trauma and critical incident care.

Vicarious trauma or secondary traumatization

Definition: These terms refer to stress and trauma reactions that can occur in response to witnessing or hearing about traumatic events that have happened to others. In these cases, other people are the victims, and you see them undergoing suffering, or hear about traumatic events that have happened to them.

Reactions: Vicarious trauma can trigger many of the same reactions that occur when you personally face a critical incident. Signs and symptoms are similar, although usually less intense, than those triggered by direct exposure to traumatic events. However, in some cases the level of traumatization can be almost as great in secondary victims as in primary ones.

Who is at risk? It is now widely accepted that interaction with victims of traumatic exposure places helpers at high risk of experiencing some form of secondary traumatic stress response. Humanitarian workers in all roles...
regularly hear distressing stories, and face the realities of violence, poverty and disaster. Vicarious trauma is therefore inherent to humanitarian work and problematic for both field and home staff. The relevant issue becomes less about how to avoid vicarious trauma, and more about how to prepare for and deal with it.

For more on detailed information on vicarious trauma see our online training module, Vicarious trauma.

**Cumulative stress**

**Definition:** Cumulative stress reactions are a less dramatic, more gradual form of stress reaction. They are usually related to low-intensity but more chronic stressors that pervade a person’s life and “pile up,” one on top of the other. Some common sources of chronic stress for humanitarian workers include:

- A chaotic and reactive work environment
- Feeling overwhelmed by unmet needs
- Tight deadlines and stressed coworkers
- Communication difficulties due to personality and cultural differences
- Inadequate preparation and briefing
- Being asked to complete tasks outside your area of training and competence
- Facing moral and ethical dilemmas
- Isolation from your familiar social support network
- Chronic sleep deprivation
- Travel difficulties and delays

**Reactions:** The negative effects of everyday stressors build up over time. Chronic stressors trigger enduring stress reactions that can grow in intensity and become problematic over time. The presence of multiple chronic stressors is often a better predictor of higher stress levels than the occurrence of the occasional critical incident. A sequence of relatively mild stressful events can ultimately create high stress levels if not dealt with effectively on an ongoing basis.

**Who is at risk?** Nearly everyone experiences this type of stress reaction at some point during their lives. However, regardless of their particular role, most humanitarian workers are exposed to elevated levels of occupation-related chronic stressors. In addition to typical chronic stressors (such as traffic delays and job evaluations), humanitarian workers also face some of the chronic challenges that come with working in a crisis culture. How you manage to strike the right balance between the urgency of the work and other areas of life is the most relevant issue. Humanitarian workers who don’t take chronic stress seriously and proactively prepare to meet the challenges run a real risk of “burning out” within 3 to 5 years of high impact work.

All three types of traumatic stress can be problematic for humanitarian workers. However, research and anecdotal evidence suggests that chronic stress reactions, such as burnout, are likely to be problematic for the greatest number of humanitarian workers. Therefore, the remainder of this module focuses primarily on recognizing and managing cumulative and chronic stress reactions.
Case in point...

“The period before deployment was extremely stressful. There was so much to do and my experience made me feel inadequately prepared. My immediate medical chain of command seemed to offer little or no support or advice. In Kosovo I spent seven extremely demanding months. I felt completely responsible for ensuring that nothing would go wrong. I knew that I was pushing myself too hard and neglecting my own personal needs but I wasn’t able to let up.”

— Cheryl Netterfield on her experience as a medical officer deployed to Kosovo (quoted in Danieli, 2002, p.50)

For personal reflection...

• Which type of traumatic stress (acute, vicarious, or cumulative) is most problematic or troublesome for you?
PART THREE | Cultural Issues

Traumatic stress is not just a problem for western humanitarian workers who relocate (usually temporarily) to developing countries and disaster zones for the sake of their job. In fact, the majority of humanitarian workers worldwide are from non-western cultural backgrounds, working in their home country. These national humanitarian workers are not exempt from experiencing traumatic stress.

Physiological and emotional responses to disaster are broadly similar all over the world. However, an individual’s interpretation of stress and trauma is shaped to some extent by culture, social context, and personal experience. It is important to acknowledge that there are differences across cultures in how events are experienced and how traumatic stress is expressed.

Humanitarian workers from non-western backgrounds reading this module will find it helpful to keep the following questions in mind as they progress through the rest of the study text. There are many commonalities across cultures in signs and symptoms of stress, and effective self-care techniques. However, there are some important differences too. For example, an individual from West Africa may experience and readily discuss physical signs of stress and tension, but feel much less comfortable discussing emotional reactions. In another example, seeking solitude may be a very effective self-care technique for people from Finland. Someone from India, however, may not find solitude helpful and energizing, but strange and discomforting. Westerners living and working internationally should also take the time to consider stress and self-care concepts in regards to their host culture.

- **What constitutes stress and trauma in the life of this culture?** For example, how is stress conceptualized? Is there a concept of individual stress in this culture or is it experienced and understood mainly through family and group processes?

- **How is stress typically experienced in this culture?** What are typical indicators of stress? Does stress tend to be experienced physically, emotionally, mentally, relationally, spiritually or through behavior? How is stress usually expressed in this culture?

- **What have people from this culture traditionally done to deal with stress?** What is the role of the individual or the community in managing stress? What individual, social and cultural, oral and behavioral mechanisms are typically used to deal with stress?
PART FOUR | Signs of Stress

Experiences that are perceived as threatening or demanding trigger a series of approximately 1,500 biochemical reactions within the body. Stress chemicals (such as adrenaline and cortisol) are dumped into the bloodstream and trigger the “fight or flight” response.

These chemicals prepare us to deal with threatening and dangerous events. For example, an elevated heart rate means that more blood is being pumped to our muscles and brain so that we can assess the threat and either fight, or run away faster. However, the fight or flight response isn’t good at helping us deal with many of the chronic stressors that we are exposed to in life. For most people, fighting or running away are not realistic options for dealing with stressors they encounter at work – not if they want to keep their jobs!

So, if fighting and running away aren’t feasible options, how do we manage these stress reactions? A good first step is learning to recognize the signs of stress that most often appear in our lives.

Reactions to stress are complex and tend to manifest in different ways for different people. The characteristics of the person (e.g., their physical and mental health, level of social support, and previous history of trauma) interact with the characteristics of the event (e.g., the magnitude and type of stressful event, the presence of cumulative stressors and other life events) to influence people’s experiences and reactions.

Stress chemicals can trigger physical reactions that can linger for days, weeks, or sometimes months. In addition to triggering physical reactions, stress hormones and chemicals affect brain chemistry and impact the way we think and feel. Over time, as our bodies, emotions and minds are affected by stress, this has implications for our spiritual selves too. Spirituality is a core component of human nature. Spirituality shapes and informs our sense of meaning and purpose, faith and hope. Whether experienced as an explicit belief in a deity, a more diffuse sense of transcendence or connectedness with nature or a life force, or a belief in human nature and solidarity, most people believe that to be fully human involves more than simply the physical dimensions of existence. Over time the types of challenges that aid workers face can impact their worldview – their conceptions of God, humanity, and where they derive their sense of meaning, purpose and hope. Finally, with the mix of physical, emotional, mental and spiritual symptoms, it’s not surprising that stress often shows up in our behavior. The following are some common signs of cumulative stress:

<table>
<thead>
<tr>
<th>PHYSICAL</th>
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<tbody>
<tr>
<td>Sleep disturbances</td>
</tr>
<tr>
<td>Changes in appetite</td>
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<tr>
<td>Stomach upsets</td>
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<tr>
<td>Rapid heart rate</td>
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<tr>
<td>Fatigue</td>
</tr>
<tr>
<td>Muscle tremors &amp; tension</td>
</tr>
<tr>
<td>Back &amp; neck pain</td>
</tr>
<tr>
<td>Headaches</td>
</tr>
<tr>
<td>Inability to relax &amp; rest</td>
</tr>
<tr>
<td>Being easily startled</td>
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</tbody>
</table>
| EMOTIONAL      | Mood swings  
|               | Feeling “over-emotional”  
|               | Irritability  
|               | Anxiety  
|               | Depression  
|               | Anger  
|               | Emotional numbness  |
| MENTAL         | Poor concentration  
|               | Confusion and disorganized thoughts  
|               | Forgetfulness  
|               | Difficulty making decisions  
|               | Dreams or nightmares  
|               | Intrusive thoughts  |
| SPIRITUAL      | Feelings of emptiness  
|               | Loss of meaning  
|               | Discouragement & loss of hope  
|               | Cynicism  
|               | Doubt  
|               | Anger at God  
|               | Alienation & loss of sense of connection  |
| BEHAVIORAL     | Risk taking (such as driving recklessly)  
|               | Over-eating or under-eating  
|               | Increased smoking  
|               | Listlessness  
|               | Hyper-alterness  
|               | Aggression |
For personal reflection...

- Have you noticed any of these general signs of stress lately?
- When you are under pressure, which of these signs of stress tend to appear first?
- Follow this link to a self-examination scale if you would like explore whether you might be demonstrating signs of stress.
PART FIVE | Risk and protective factors

In addition to learning to recognize our own specific “early warning signals” so that we can identify when we’re experiencing unhealthy levels of stress, it’s helpful to know what risk and protective factors we carry with us. Risk factors increase our vulnerability to experiencing traumatic stress reactions. Protective factors decrease our vulnerability by increasing our personal hardiness and resilience and enabling us to deal with increased levels of stress with less distress.

Risk factors

Research has identified several factors that impact the likelihood of experiencing traumatic stress reactions when exposed to sufficient stressors. These are:

- **The nature and intensity of traumatic events experienced in the past:** There is no escaping our own personal histories completely when it comes to stressful and traumatic events. While a desire to help others in need can spring from our greatest personal wounds, it is important to recognize that confronting the trauma of others can trigger our own memories of hurt and betrayal. This is important to keep in mind, since recent research suggests that at least a third of humanitarian workers have undergone traumatic events prior to any experiences they may encounter in the field.

- **The nature and intensity of the traumatic or stressful event that triggers the current reaction:** The type of stressful event influences the likelihood of experiencing stress and trauma reactions. Experiencing or witnessing a man-made disaster involving human cruelty (such as an armed attack) is usually more stressful than experiencing or witnessing natural disasters.

- **The number of stressors experienced:** Those who are experiencing multiple significant life events and changes (such as the death of a parent or moving internationally) tend to be more vulnerable.

- **The length of exposure to stressful situations:** As exposure lengthens, risk increases.

- **Organizational factors:** Preliminary research suggests that humanitarian workers identify organizational factors such as team relationships, leadership, clarity of mission objectives, and agency structure, as their primary cause of chronic stress.

- **History of previous psychiatric illness:** Those with a prior history of psychiatric illness, especially those who have experienced acute stress disorder or post-traumatic stress disorder, tend to be more vulnerable.

- **Lack of social support:** Social support is very important in protecting humans from the effects of stress and trauma. Recent research suggests that, compared to those with medium to high levels of social support, those with compromised social support are 4 times more likely to experience traumatization and 2.5 times more likely to experience some form of physical illness. Individuals without partners are also at greater risk.

- **Pronounced introversion:** People who are introverted are typically more vulnerable.

- **Negativity and pessimism:** Habitually negative, pessimistic individuals are more vulnerable to stress-related dysfunction. In addition, the more negative their appraisal of the meaningfulness of their humanitarian mission or work assignment, the more vulnerable they are.
**Protective factors**

In contrast, the following factors tend to help people thrive in the face of adversity. They buffer individuals against the effects of stressful experiences, and help them cope with the transitions demanded by significant life events:

- **Social support:** Well-developed interpersonal skills, extraversion, and the ability to secure and maintain a good social network are vital to emotional health and stability. Recent research suggests that strong relationships with others may be even more important than personal coping knowledge and skills, and the best protection in stressful environments.

- **Optimism and healthy self-esteem:** An optimistic outlook, regular experiences of positive emotions, a healthy self-esteem, and faith in self are traits that foster hardiness and resilience.

- **Spirituality:** Spirituality incorporates an individual's vision of a “moral order” and search for meaning and purpose, religious beliefs, and hope for the future. In general, spirituality is a very effective protective factor. The exceptions appear to be when an individual's spirituality is naïve (untested and/or not thoughtfully constructed), or when individuals are particularly rigid in their spiritual beliefs. In these instances, individuals who are faced with the challenges of humanitarian work appear to be more vulnerable to the shattering of rigid worldviews, loss of sense of meaning and purpose, negative self-images, and other attendant psychological difficulties.

- **Adaptability:** A certain degree of flexibility in belief structure, emotional experience and worldview is a protective factor.

- **Tendency to find meaning:** A natural tendency to find meaning and purpose in events, especially stressful events that challenge an individual, is another protective factor.

- **Curiosity and openness to experience:** Curiosity and openness to new experiences are related to adaptability, hardiness and resilience.

- **Aptitude:** Resourcefulness, intellectual mastery and general capability are protective factors.
### RISK FACTORS

- The nature and intensity of any traumatic events experienced in the past
- The nature and intensity of the traumatic or stressful events that trigger the current reactions
- The number of stressors experienced
- The length of exposure to stressful situations
- Organizational factors
- History of previous psychiatric illness
- Lack of social support
- Pronounced introversion
- Negativity and pessimism

### PROTECTIVE FACTORS

- Social support
- Optimism and healthy self-esteem
- Spirituality
- Adaptability
- Tendency to find meaning
- Curiosity and openness to experience
- Aptitude

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**For personal reflection…**

- Which of these risk and protective factors can you recognize in your own life history, current situation, and personality?
- How do you see these factors interacting with the stress you experience?
PART SIX | Burnout

As stress accumulates and stays at high levels for extended periods of time, humanitarian workers run an increased risk of experiencing burnout. Burnout is a process, not an event. This term refers to a type of cumulative stress reaction that occurs after prolonged exposure to occupational stressors. Prolonged exposure to emotionally demanding situations with inadequate support gradually depletes an individual’s own natural resources for dealing with stress and strain.

The following are occupational situations that typically contribute to burnout:

- Conflict between individual values and organizational goals and demands
- Lack of managerial and/or social support
- Overload of responsibility
- Role confusion
- Sense of having no control over quality or outcome of work
- Little emotional or financial reward
- Existence of inequity, lack of respect
- Consistent exposure to traumatic material

In the humanitarian field, the road to burnout is often paved with good intentions. Those who come into a job or an overseas assignment thinking that it’s going to be the solution to all their problems, who have extremely and unrealistically high hopes and expectations about the change they will make, and who would rather work than do anything else, are prime candidates for burnout. There is nothing wrong with being idealistic, a hardworking perfectionist, or a self-motivating achiever. The problem lies in the reality or unreality of the ideals and expectations. Unrealistic, highly idealistic job expectations and aspirations are doomed to lead to failure and frustration.

As with other types of stress reactions, people tend to experience burnout in different ways. However, normal signs of burnout do tend to cluster in physical, emotional, mental, spiritual and behavioral domains. The following are some common signs of burnout:

| PHYSICAL | Exhaustion  |
|          | Headaches   |
|          | High blood pressure |
|          | Insomnia    |
|          | Dreams      |
|          | Back pain and other chronic tension-linked pain |
|          | Stomach complaints |

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| EMOTIONAL          | Self-doubt  
|                   | Blame       
|                   | Negativity  
|                   | Disillusionment  
|                   | Reduced sense of accomplishment and purpose  
|                   | Feeling unappreciated or betrayed by the organization  
|                   | Foggy thinking  
|                   | Mental apathy  
|                   | Lack of insight into reduced capacity to function well  
| MENTAL            | Emotional exhaustion and fragility  
|                   | Feeling overwhelmed  
|                   | Feeling helpless  
|                   | Hopelessness  
|                   | Mistrust of colleagues & supervisors  
|                   | Depression  
|                   | Anxiety  
| SPIRITUAL         | Apathy  
|                   | Inability to engage  
|                   | Wounded ideals  
|                   | Cynicism  
| BEHAVIORAL        | Decline in performance  
|                   | Apathy  
|                   | Boredom  
|                   | Interpersonal difficulties  
|                   | Irritability  
|                   | Increased addictions or dependencies  
|                   | Reckless behavior  
|                   | Neglecting one's own safety and physical needs  

What is the best defense against burnout?

The first and best line of defense against burnout is prevention! Apart from cultivating a “certain sense of realism,” one of the best things you can do to avoid burnout is to create balance in your life. Invest more in family and other personal relationships, social activities and hobbies. Spread yourself out so that your job doesn’t have such an overpowering influence on your self-concept and self-esteem. As you read through the final sections of this module, thoughtfully examine your self-care practices. They will help prevent ordinary stress from becoming distress, and distress from becoming burnout.

For personal reflection...

- Have you noticed any of these general signs of burnout lately?
- Follow this link to a self-examination scale if you would like to explore whether you might be demonstrating signs of burnout.
PART SEVEN | Examining your own well-being

In the long run, taking care of our own well-being is an essential prerequisite for effectively helping others. It is one of the best ways to maintain fitness to continue in that helping capacity.

The first step to taking care of your well-being and dealing more effectively with stress and burnout is understanding your own self-care strengths and needs. Taking a personal inventory helps you understand where your natural self-care strengths lie, and which self-care areas need extra attention.

Before going on to the final section of this module, pause for a moment and take inventory of how you are doing, and identify which helpful lifestyle-balance strategies you use regularly.

For personal reflection...

- What are some of your typical self-care and coping strategies (both negative and positive) when you are stressed, fatigued, or anxious?
- What sustains you in this work (i.e., what refreshes you, energizes you, and gives you hope)?
- What helpful self-care strategies do you wish you were using more regularly?
- [Follow this link to a self-examination scale if you would like to explore whether you currently have good self-care strategies in place to help prevent burnout.](#)
PART EIGHT | Combating stress and burnout through self-care

Dealing proactively with stress is a learnable skill often summed up by the phrase “stress management.” The objective of good stress management is not merely to help you survive your career - but to help you grow and thrive as a result of the stressful challenges that you might face. In short, it involves recognizing natural self-care strengths already present in your life and learning how to apply these, and additional helpful strategies, more consistently.

You will never become so good at taking care of yourself that you lead a stress-free life. However, there is much you can do to make sure you’re taking care of yourself properly, to improve your well-being, and to help alleviate traumatic stress reactions such as burnout! No single technique will relieve all your stress, but paying attention to the following three areas of self-care will build up your hardiness (your ability to handle more stress with less distress) and your resilience (your ability to “bounce back” after particularly stressful or traumatic events).

Physical

- **Regular exercise**: Exercising at least three times a week with a mixture of aerobic exercise (e.g., running, walking, swimming), exertion (e.g., weights), and stretching (e.g., pilates) has multiple stress management benefits. For example, it helps our bodies process stress-related chemicals, reduces muscle tension, releases “feel-good” chemicals called endorphins, helps us stay generally fitter and healthier, and improves our sleep. This is one of the single most effective stress management strategies.

- **Sleep**: Most adults need between seven and nine hours of sleep a night to function at their best.

- **Healthy eating**: Just as your car would not run well on poor quality fuel or no fuel at all, our bodies and brains function much better when we provide them with the right type of fuel.

- **Drinking enough water**: By the time you feel thirsty you’ve already lost 2 to 3 percent of your body fluid. This lowers your blood volume, making your heart work harder to pump blood to your brain. Staying hydrated is one of the easiest ways to help ourselves function well.

- **Laughter**: Laughter and positive emotions release “feel-good” chemicals that act to undo the cardiovascular effects of negative emotions and help our bodies relax.

- **Limiting your consumption of alcohol**: Alcohol not only lowers our inhibitions and leads us to do things we may not normally do, but it is a depressant and depletes essential vitamins useful in helping us to deal with stress (the B complex vitamins).

- **Relaxation techniques**: A variety of relaxation techniques (such as progressive muscle relaxation, diaphragmatic breathing, visualization and meditation) can be used to elicit the relaxation response. This acts to undo the muscular and cardiovascular effects of negative emotions and help our bodies relax.

- **Massage, whirlpool, sauna**: Touch and warmth are effective ways of eliciting a relaxation response and cueing our bodies to relax.

- **Repetitive activities**: Repetitive and absorbing activities such as cross-stitching, walking, quilting, drawing and cooking can function as a form of moving-meditation that is soothing and relaxing.
Emotional and relational

- Nurturing relationships
- Contact with home/friends through email, phone, tapes
- Talking
- Humor
- Ongoing support group
- Reflection: journaling, writing, meditating, poetry
- Creative activity such as drawing, sculpting, cooking, painting and photography
- Movies, books, music
- Having balanced priorities
- Understanding traumatic stress and having realistic expectations
- Counseling

There are three main themes apparent in these emotional and relational self-care techniques:

**Interpersonal relationships**: Social support factors play a major part in determining stress reaction factors and vulnerability. Our relationships with each other are so important that recent research suggests that “it may be our relationships that save us rather than our knowledge and skills” (Fawcett, 2003, p.124). If you don’t have a strong social support network, make an effort to create one. The most protective social networks aren’t necessarily large, but they are interconnected. Families and groups of friends who know each other well are examples of interconnected networks.

**Time away/distraction**: Allowing yourself a breather and the chance to step away on a regular basis is another crucial emotional self-care technique. Ideally you should take some time off every week to disengage from work and issues that drain you. At least some of this time should be spent doing something fun and relaxing. It is especially important for humanitarian workers to be aware of these types of boundaries. Working in this field tends to sensitize you to international issues and the impact of disaster, making it difficult to disengage even when you’re not at the office.

**Storytelling**: Being involved in humanitarian work changes people. Seeking to understand and express these changes is an important method for dealing with the impact of the work. Storytelling can take several forms – talking with friends or counselors, journaling, and writing letters, stories, poetry, or other more abstract forms of creative activity such as painting. Writing appears to be an especially effective way of dealing with the impact of trauma and stress. Writing detailed accounts of stressful events in a way that links facts with feelings has been shown to have a positive impact on physical health.

**Spiritual**

- Knowing your values: Where do you tend to find meaning in life?
• Participating in a community of meaning and purpose
• Regular times of prayer, reading, meditation
• Spiritually meaningful conversations
• Singing or listening to spiritual music
• Contact with religious leaders or inspiring individuals
• Time with art, nature or music
• Solitude

Paying attention to spirituality, just like physical and emotional self-care, builds hardiness and resilience. It helps you maintain perspective, and acts as a compass and an anchor when you’re feeling overwhelmed. It is almost impossible to do humanitarian work without it affecting your worldview and spirituality, your sense of what’s important to you in life, and your source of strength and hope. Profound challenges to spirituality and worldview are some of the most significant challenges that humanitarian workers face during their careers. John Fawcett puts it well:

“There will come a time, if you pursue this career for long, when a profound lack of understanding will threaten to sweep away your actions, beliefs, achievements and even reason for being. Knowing this challenge will come, and ensuring that there are close friends who can hear your questions without harming you, is an essential component to preventative stress management”

— (Fawcett, 2003, p.154)

So how do we feed our faith? First, by understanding our personal values, what we tend to find most meaningful in life, and how this nurtures our spirituality. Second, by seeking out things that are in line with our deepest values and where we tend to find meaning – these are things that make us feel whole, alive, joyful, and connected with something beyond ourselves. Soul food like this tends to shift the way we view our life and the life around us. Some common sources of soul food are prayer, reading scriptural texts, religious services, meditation, deep relationships, nature, art and music.
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<th>PHYSICAL</th>
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<td>Regular exercise</td>
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<td>Contact with home/friends through email, phone, tapes</td>
<td>Participating in a community of meaning and purpose</td>
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<td>Regular times of prayer, reading, meditation</td>
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<td>Drinking water</td>
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<td>Relaxation techniques</td>
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**For personal reflection...**

- Which of these self-care strategies do you use regularly?
- Which do you find most helpful to you?
- Which strategies do you wish you used more regularly?
SELF QUIZ | Test your Knowledge

Choose the best answer to each of the following questions. This quiz is meant to test your comprehension of the material in the module you have just read. Your answers will be automatically tallied at the end of this 20-question quiz.

1. International humanitarian workers commonly experience stress from which of the following sources?
   a. Violence & threat
   b. Social dislocation
   c. Spiritual dislocation
   d. The work environment
   e. All of the above

2. Stress can be defined as any demand or change that the human system (mind, body, spirit) is required to meet & respond to.
   a. True
   b. False

3. Stress becomes distress, or traumatic stress, when it lasts too long, occurs too often, or is too severe.
   a. True
   b. False

4. Something that is very stressful for one person is always stressful for others.
   a. True: Everyone finds the same types of events stressful to the same extent.
   b. False: Your individual perception (how threatened you feel and how much control you have over the circumstances) can affect the degree of distress you personally feel.

5. Trauma reactions that occur as the result of a critical incident (a traumatic event during which an individual experiences the threat of serious harm of death) are often referred to as:
   a. Critical incident stress
   b. Acute stress reactions
   c. Both of the terms above are regularly used to refer to this type of trauma reaction

6. Experiencing traumatic stress reactions after a critical incident is a normal response to an abnormal situation.
   a. True
   b. False

7. Traumatic stress reactions never occur in response to witnessing and/or hearing about traumatic events that have happened to others.
   a. True: Individuals must be directly involved in traumatic events to be impacted by them.
   b. False: Interaction with people who have experienced traumatic events places helpers at risk of experiencing some form of secondary traumatic stress response.
8. Some common sources of chronic stress for humanitarian workers include:
   a. A constantly chaotic and reactive work environment
   b. Feeling overwhelmed by the apparent need
   c. Inadequate preparation and briefing
   d. Being asked to complete tasks outside their area of training and competence
   e. All of the above

9. Over time, the presence of multiple chronic stressors is usually a better predictor of higher stress levels than the occurrence of the occasional critical incident.
   a. True
   b. False

10. Humanitarian workers are at risk of experiencing which of the following types of traumatic stress?
    a. Critical Incident Stress
    b. Vicarious trauma
    c. Cumulative Stress
    d. All of the above

11. People from different cultures experience and express traumatic stress exactly the same way.
    a. True
    b. False

12. Which of the following is not a factor that increases the risk that you will experience traumatic stress reactions?
    a. Nature and intensity of any past traumatic events experienced
    b. The number of stressful events experienced
    c. Good social support
    d. Organizational factors
    e. History of previous psychiatric illness

13. Which of the following is not a normal sign of cumulative stress?
    a. Sleep disturbances
    b. Seeing things that aren’t there
    c. Fatigue
    d. Poor concentration
    e. Eating more than normal

14. Which of the following statements is true?
    a. Burnout is a process, not an event. It is a term used to refer to a type of cumulative stress reaction that occurs after prolonged exposure to occupational stressors.
    b. Burnout happens suddenly. It is an acute breakdown of personal functioning that tends to happen with few warning signs.

15. Which of the following is a helpful way of preventing or alleviating burnout?
    a. Cultivating a “certain sense of realism” about your job and its outcomes.
    b. Create balance in your life, invest more in family and other personal relationships, social activities and hobbies.
    c. Both of the above are helpful strategies in preventing or alleviating burnout.
16. When trying to increase your hardiness and resilience, it is important to pay attention to which of the following self-care areas?
   a. Physical
   b. Emotional and relational
   c. Spiritual
   d. It is important to pay attention to all of these areas.

17. Which of the following is not a good physical self-care strategy?
   a. Regular exercise
   b. Getting enough sleep
   c. Drinking a bottle of wine every night
   d. Laughing
   e. Practicing a relaxation technique

18. Which of the following is not a helpful emotional or relational self-care strategy?
   a. Talking to a good friend
   b. Spending all your time with people who only see the negative side of situations
   c. Writing in a journal
   d. Watching a funny movie
   e. Understanding stress reactions

19. Profound challenges to spirituality and worldview are usually some of the most significant tests that humanitarian workers face during their careers:
   a. True
   b. False

20. Which of the following are helpful spiritual self-care strategies?
   a. Participating in a community of meaning and purpose
   b. Regular times of prayer/reading/meditation
   c. Spiritually meaningful conversations
   d. Time with art, nature or music
   e. All of the above
# QUIZ RESULTS

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RESOURCES

This module provides an introduction to the phenomenon of traumatic stress. It is intended to provide you with some basic information about stress and coping, and guide you towards additional resources that will enhance your understanding of this topic. Helpful websites and books are listed below. Please contact the Headington Institute at info@headington-institute.org, or phone 626.229.9336 if you’d like more information, wish to speak to a mental health professional, or desire a professional referral.

On the internet

Psychological.org: http://psychological.org

Mobile Member Care Team for Missionaries: http://www.mmct.org/sources.htm

Baldwin’s Trauma Information Pages: http://www.trauma-pages.com/

The Sidran Institute for Traumatic Stress Education and Advocacy: http://www.sidran.org/index.html

Risks associated with the psychological adjustment of humanitarian aid workers: http://www.massey.ac.nz/trauma/issues/20041/mcfarlane.htm

Books


The humanitarian companion (2004). Written by John Ehrenreich. Published by IDTG Publishing.


CERTIFICATE
OF COMPLETION

This certificate is awarded to
__________________________

For completion of the online module:
UNDERSTANDING AND COPING WITH TRAUMATIC STRESS

By signing this certificate, I declare that I have read the online module. I acknowledge that the Headington Institute is not responsible for verifying completion of this course.

PARTICIPANT SIGNATURE

DATE

DR. JAMES GUY, PRESIDENT & COFOUNDER

PARTICIPANT SIGNATURE