

MODULE 7.2

**FACTSHEET ON COPING WITH
THE EFFECTS OF TRAUMA**



UNHCR
The UN Refugee Agency



LEGEND

 **LEARNING OBJECTIVES**

 **REFLECTION ACTIVITY**

 **SUPPLEMENTARY READING**

 **SELF-REFLECTION / NOTES SECTION**

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What you can do to cope?

Good coping strategies are activities or mindsets that help you take care of yourself – especially those that help you **escape**, **rest** and **play**. Among other things, these might include:

- **Escape:** Get away from it all, physically or mentally (read books or watch movies, take a day or a week off, play video games, go to a museum, concert, beach, park, meet with and talk to friends about things other than work);
- **Rest:** Have no goal or timeline, or do things you find relaxing (lay on the grass watching the clouds, sip a cup of tea/coffee, take a nap, get a massage, do whatever makes you relaxed); and
- **Play:** Engage in activities that make you laugh or lighten your spirits (share funny stories with a friend, play with a child, be creative, do sports and be physically active).

How to address vicarious trauma?

There are three especially important themes to keep in mind when considering a long-term action plan to help you address vicarious trauma – **awareness**, **balance** and **connection**.

- **Awareness** can help you address vicarious trauma by identifying and understanding your own reactions and by practicing awareness itself. Being aware of what you are doing while you are doing it, deliberately keeping your mind and your body in the same place, may help you prevent and manage vicarious trauma.
- **Balancing** your personal needs with the demands of your work is particularly important and can be done by taking daily, weekly, monthly and annual breaks. It is also important to balance really demanding work with less challenging work to work in a sustainable way.
- **Connection** – maintaining nurturing relationships and meaningful contact with family, friends, and colleagues – is one of the best things to help address vicarious trauma. An essential part of a spiritual connection is to find one's own path to connecting with a sense of awe, joy, wonder, purpose, meaning and hope, and revisit it regularly and frequently.



How to improve resilience?

Resilience building is an ongoing process that requires time and effort; it involves behaviours, thoughts and actions that can be learned and developed in anyone. Resilience building makes a person less vulnerable to stressors and more prepared for future challenges.

Resilience can be developed through:

- Seeking social support and making connections, talking about the monitoring experience with a supervisor, fellow colleague(s) or someone else who is trusted, staying connected with your family, friends and colleagues
- Nurturing a positive view of oneself and focusing on your own strengths and abilities
- Looking for opportunities for learning, personal growth and self-discovery
- Learning to accept that change is part of life
- Attending to self-care: taking time to eat, rest and relax, and doing some physical exercise
- Learning from what has helped you cope in the past and what can help you stay strong
- Seeing challenges as opportunities for growth
- Keeping reasonable working hours
- Separating and balancing private life and work
- Identifying ways to nurture a sense of meaning and hope – reminding oneself of the importance of your work
- Identifying risk factors you are exposed to and how to respond
- Learning to reflect on and accepting what you did well, what did not go very well, and the limits of what you could do in the circumstances

What can organizations do?

Actions at organizational level can include:

- ➔ Ensuring regular supervision for all staff, including interpreters, by a professional psychotherapist who is familiar with the circumstances they are exposed to
- ➔ Encouraging connections, morale and relationships through working in teams, developing peer support and mentoring networks
- ➔ Ensuring internal capacity or availability of external capacity to respond to critical incidents
- ➔ Encouraging communication and staff contributions by providing a voice in decision making on the part of staff, and feedback to staff at all levels of the organizational hierarchy; and by providing transparency of decision making, policies, resources and assignments
- ➔ Developing psycho-educational strategies to increase knowledge of various types of mental health problems and to reduce stigma; this could include online educational programmes, regular information on the intranet and the possibility of self-assessment



What can managers do?

Managers can take many steps to help lessen the impact of vicarious trauma on staff they are supervising, including being a good example by how they maintain balance and care for themselves.

1. Understand the psychological and spiritual impact of humanitarian work
 - a) Be alert to how the cumulative exposure to stressful and traumatic situations may affect staff
 - b) Regularly check in with staff about how they're coping – do not wait for them to approach you with a problem
 - c) Support staff in seeking counselling or coaching if and when needed
2. Set a good example by the way you care for yourself
 - a) Work at a sustainable and reasonable pace over time, and encourage staff you supervise to do the same
 - b) Openly value things and people outside of work (e.g. time spent with your family)
 - c) Take allocated leave time
 - d) Acknowledge that humanitarian work can be challenging and that a healthy work-life balance takes practice and intention
3. Especially during times of increased pressure or crises, look for ways to help staff keep current challenges in perspective
 - a) Remind staff of the bigger picture of the organization's mission and purpose, and how this assignment fits into that bigger picture
 - b) Remind staff of the value the organization places upon them both as people and the organization's most important resources – the staff
 - c) Encourage staff to work in sustainable ways. If that does not appear possible in the short term, encourage them to take extra time after the immediate impact phase is over to rest and regain equilibrium
4. Express concern for the general well-being of your staff and not just the quality of the work they are doing
5. Make sure that staff suggestions and feedback about their jobs and the organization are heard and valued – even if you are fairly sure they will not result in tangible change in the near future
6. Do not say or do things that would stigmatize staff who are struggling with vicarious trauma or other stress or trauma-related issues
7. Strive to stay positive, and to praise and acknowledge effort and results whenever possible





ADDITIONAL RESOURCES

- ✓ Barna Mária and Gyulai Gábor, [*From Torture to Detention: Access of Torture survivor and traumatised asylum-seekers to rights and care in detention*](#), Cordelia Foundation, Budapest, 2016.
- ✓ The European Network for Traumatic Stress (TENTS), *The TENTS Guidelines for Psychosocial Care Following Disasters and Major Incidents*, Cardiff University, Cardiff, Wales, 2008.
- ✓ Hárdi, Lilla and Adrienn Kroo, “Psychotherapy and psychosocial care of torture survivor refugees in Hungary: ‘A never-ending journey’”, *Torture*, vol. 21, no. 2, 2011, pp. 84–97.
- ✓ Hárdi, Lilla, *Care for Caregivers: Hungarian experiences with the caregivers of refugees*, Cordelia Foundation for the Rehabilitation of Torture Victims, Budapest, 2006.
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- ✓ International Rehabilitation Council for Torture Victims, [*IRCT Annual Report 2015*](#), IRCT, Copenhagen, 2016.
- ✓ The KonTerra Group, [*Essential Principles of Staff Care: Practices to Strengthen resilience in international humanitarian and development organizations*](#), The KonTerra Group, Washington, D.C., 2017.
- ✓ UNHCR, Learning Programme for New hires-Resilience and Vicarious Trauma, Learn & Connect.
- ✓ UNHCR and Webster University, *Staff Well-Being and Mental Health in UNHCR*, UNHCR, Geneva, 2016.
- ✓ World Health Organization and War Trauma Foundation, *Psychological First Aid: Guide for field workers*, WHO, Geneva, 2011.
- ✓ World Health Organization, *Clinical Management of Mental, Neurological and Substance Use Conditions in Humanitarian Emergencies: mhGAP Humanitarian Intervention Guide (mhGAP-HIG)*, WHO, Geneva, 2015.
- ✓ World Health Organization and Columbia University, [*Group Interpersonal Therapy \(IPT\) for Depression*](#), WHO, Geneva, 2016.
- ✓ World Health Organization, [*World Health Day: Depression – Let’s Talk. Campaign toolkit*](#), Geneva, 2017.





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