



Bearing the Pain of Others in a Disaster* **How to Help the Helpers**

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The recent earthquake in Haiti, killed an estimated 200,000 people and left another million homeless. In every tragedy or disaster, there are immediate and vivid heart-wrenching scenes of the physical devastation and psychological damage caused by the ferocity of nature or human-generated events. Yet there is precious little attention given to the trauma suffered by the brave women and men who are helping the people directly affected. Usually not even recognized by its own victims, vicarious trauma (VT) is the emotional pain suffered by those who devote themselves to helping other people with their pain.

Vicarious trauma, (also labeled "secondary trauma," "empathic strain," "secondary victimization," or "compassion fatigue") is an undesired physical, psychological, social or spiritual change in someone committed to helping people who have been injured or traumatized. This condition is more typically found among first responders, social workers, medical personnel, volunteer workers, counselors, volunteers, spiritual advisors and many others in the role of "helper." Often hidden or ignored, it is a very real problem that cripples caregivers and limits resources.**

HOW TO HELP YOURSELF AND OTHER HELPERS

• RECOGNIZE THAT VICARIOUS TRAUMA EXISTS

Witnesses, helpers and healers can't help but absorb some of the emotional pain of those who have suffered a loss. In coping with the intensity of the work it is very important to acknowledge that vicarious trauma does exist and affects us. It affects us because we care, because we empathize with others, because we are committed to others and because we are responsible.

Even if you are just observing or listening to what someone is going through, it still can affect you. Sometimes, even caring people, far from the actual tragedy, especially those who are "glued" to the television, continuously broadcasting "live" reports can be affected. It is "normal" to be affected if you work with people who are suffering, even if you are not working in the disaster of the moment.

Recognizing that vicarious trauma affects you is the most important gift that you can give to yourself.

* Summary of *Vicarious Trauma: Bearing the Pain of Others in a Disaster*, Gilbert Brenson-Lazan; http://globalfacilitators.org/virtlib/GBL_VicariousTrauma_feb2010.pdf.

** The Headington Institute, <http://www.headington-institute.org> is an excellent resource for defining, assessing, addressing vicarious trauma.

• RECOGNIZE THE NORMAL GRIEF CYCLE

After a traumatic event, there are two initial stages of grieving that all people go through to one degree or another (Brenson-Lazan, 1996):

Denial

- of the **existence** of the tragedy itself—mental shock or stupor: *"My son can't be dead. The identification is a mistake."*
- of the **significance** or meaning of the tragedy: *"We'll get over this quickly."*
- of present and future **options**: *"In this country, we will never progress."*
- of **resources** that may be or may become available: *"We're all alone in this tragedy."*

Initial Reactions

- **Physical**: disruption of sleep and/or eating patterns, energy extremes, changes in appearance, headaches, rashes, digestive problems, muscle aches, etc.
- **Psychological/Emotional**: anxiety, depression, perceptual distortion, emotional extremes
- **Social**: changes in relationships and interpersonal crisis
- **Spiritual**: extremes of fanaticism, a loss of faith, increase in supernatural thinking

While these are normal, natural and necessary initial reactions in the process of grieving, they are precisely the triggers of VT and the sources of the negative energy that caregivers absorb and have to deal with. If these reactions escalate or continue beyond the initial period, they indicate a need for therapeutic help.*

• RECOGNIZE THE SYMPTOMS OF VICARIOUS TRAUMA

Some of the most common symptoms of VT are:

- Frequent emotional outbursts (anger, fear, crying, etc.)
- Loss of meaning or hope
- Excessive self-doubt
- Unaccustomed passive submission
- Poor decision-making
- Crisis in established relationships
- Excessive controlling behaviors
- Excessive self-sacrifice
- Physical reaction to distress (indigestion, muscle pain, skin rash, etc.)
- Marked changes in sleeping and eating patterns
- Strong denial of emotions
- Radical changes in expressions of spirituality

* Global Facilitator Service Corps (<http://globalfacilitators.org>), offers several publications at no charge for adults and for children affected by a disaster, and for the facilitators and other who assist those affected. These materials include workbooks and manuals with information on the normal, natural and necessary stages and characteristics of the grieving process experienced by those who have been in a disaster.

• **RECOGNIZE THE RISK FACTORS**

Vicarious Trauma is compounded when we have also suffered a personal loss in the current disaster, or have suffered a past loss that we have not fully processed. Other factors that can make someone more prone to VT or make it more severe include:

- Tendency to internalize feelings and emotions
- Tendency to withdraw or not ask for help
- Excessive stress or fatigue
- Lack of attention to personal needs
- Excessive risk-taking
- Unrealistic expectations of results Lack of understanding of the culture of the survivors
- Organizational neglect or disorganization
- Tendency to work compulsively to the exclusion of personal and family needs, or to neglect work-life boundaries

• **RECOGNIZE YOUR OPTIONS**

How do we cope with Vicarious Trauma in ourselves, colleagues and friends? How do we transform these actions into tools for becoming more resilient people and take part in creating a more resilient community?

Work together with colleagues, professionals and friends to explore options, share tools and techniques to recognize, cope with and learn from VT. These 4 Rs are helpful and practical suggestions.

4 Rs TO TRANSFORM VICARIOUS TRAUMA

1. REFLECT upon your reactions

Focus your thinking about your situation. Ask yourself questions, for example,

- What gives my life meaning and purpose?
- What have I done lately that will make a difference in someone's life?
- What excessive emotional reactions have I had recently?
- How can I take better care of myself?

2. RESPECT YOUR OWN LIMITS

Know your limits. Reduce or avoid exceeding those limits. Ask an experienced, trusted colleague to help you determine how reasonable and realistic your goals are.

3. RECHARGE YOUR BATTERIES REGULARLY

Take a "vacation" every few hours, every day, every week, every month, every year and every seven years. These breaks add positive energy, helping balance (and reduce) the stresses of VT by setting aside time for oneself—time for personal reflection, good health, hobbies and time away from work. Do not feel guilty about this time away from the stresses of work. It is healthy to set aside time and space for yourself. You will feel better and do a better job when you return.

Some suggestions:

- Avoid working during mealtime...talk about other things
- Take a daily 5-minute stress-reduction break mid-morning and/or mid-afternoon: go for a walk; stretch your muscles (including, face, neck and shoulders); read something beautiful, some thing that inspires you
- As much as possible, eat a balanced diet. Good nutrition is key to reducing VT.
- Develop daily or weekly time to develop or enhance your spiritual life.
- Every 5-7 days take one complete day off from your disaster intervention work.
- At least every two weeks, leave the physical area of your work for a couple of days.

4. RECONNECT WITH OTHERS

A strong network can sustain us when all else fails, supporting us in moments of personal need, providing opportunities to share with those who understand and respect us, for example

- Stay connected to your network, friends and family using face-to-face, social networking tools and cell phones to support and listen to one another.
- Get together at least every two weeks with your team, to monitor progress, challenges and VT.
- Convene "town hall" community meeting to make decisions together, console one another and mutually support community rebuilding efforts.
- Help small groups (clan or family-based, faith-based, neighborhood-based) to share the pain and loss as well as share resources to get through the crisis.
- Use a focused conversation method to help groups and individuals deal more effectively with grieving.*

Remember to

- Establish rituals of transition.
- Mourn any losses, together.
- Celebrate every success or milestone achieved, together.

Tragedies like the earthquake in Haiti cause many years—perhaps a generation—of challenges and opportunities. We can only face these effectively and become more resilient, if we first take care of ourselves and of one another.



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* see Jo Nelson's: *The Art of Focused Conversation*, Canadian Institute of Cultural Affairs © 2001