

## February 2010

### What's Inside

Bearing the Pain of Others in a Disaster  
Update: Australia  
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### Bearing the Pain of Others in a Disaster\* *How to Help the Helpers*

Gilbert Brenson Lazan

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," or "compassion fatigue") is an undesired physical, psychological, social or spiritual change in someone committed to helping people who have been injured or traumatized. Its victims are typically among first responders, social workers, medical personnel, volunteer workers, counselors, volunteers, spiritual advisors and many others. Often hidden or ignored, it is a very real problem that cripples caregivers and limits resources.\*\*

\* Summary of *Vicarious Trauma: Bearing the Pain of Others in a Disaster*, Gilbert Brenson-Lazan; [http://globalfacilitators.org/virtlib/GBL\\_VicariousTrauma\\_feb2010.pdf](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.

### 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.



• **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:

#### 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**

- 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

\* GFSC (<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. 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.



### Update: Australia Results of Marysville & Triangle Celebration Day

*“It was a watershed in letting us start to think again of the future... it was remarkable - you all listened to us.... we had a chance to speak our thoughts and be heard...”*

After Celebration Day, Nigel Bell made sure to widened support for the process, including “old-timers, as well as “weekenders and newcomers”. We are very aware of the continued difficulties in adequately addressing who speaks for whom.

A Marysville and Triangle ‘design charrette’ was the essential next step for an energised community. Charrettes are a form of live action collaborative community design, where all the relevant players community representatives, architects, town planners, roads people and government regulators go at it full tilt for 3+ days to turn community aspirations into a workable design that can be funded and built. Charrettes are faster and more democratic than the usual bureaucratic/planning procedures. The design charrette became central to the rebuilding agenda and the selected consultants tasks.

Just prior to the design charrette, called the ‘Phoenix Workshop’, we addressed the issue of too many bureaucrats, not enough real people

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

by increasing public participation and feedback sessions.

The Phoenix Workshop worked reasonably well, using the Celebration Day results as the springboard. All contentious matters were systematically addressed, with the only remaining – and continuingly divisive – matter being the 'Rebuilding Advisory Centre'.

It is often complex and complicated working with several community groups and government agencies. A large portion of the needed funding was offered for the RAC building, but it required an immediate start and immediate agreement. There were strong objections to the lack of consultation/discussion; location; appearance; use; setting the wrong model for rebuilding; etc.

The Phoenix workshop, with the Phoenix consultants, produced the *Urban Design Framework* (UDF) new planning scheme and, subsequently, a *Marysville Performing Arts Centre (MPAC) Feasibility Study*, drawing together the rationale, funding and support for a new Marysville story, industry and genius-loci – suggesting the basis for a new and creative town. But whilst decision-makers have acknowledged support, like most other rebuilding matters, it's slow to progress.

Meantime, \$4.25M funding for a Sports and Recreation Centre has been announced!

Throughout it all the support of the Australian Children's Trust, MATDG, MOCA has been fabulous.



And of course the skills and generosity of the facilitators and volunteers were crucial in getting the initial change in direction.

There's so much more to do. We all made an excellent start. Marysville information, photos and reports on the above can be found on the web sites of VBRR, MATDG and MOCA.

Submitted by

Andrew Gaines  
Alliance for Sustainable  
Wellbeing  
[www.alliance-for-sustainable-wellbeing.com](http://www.alliance-for-sustainable-wellbeing.com)

Nigel Bell  
ECOdesign Architects +  
Consultants



### What You Can Do

1. Get involved in your community! There are people who need your help right nearby: refugees; immigrants; people out of work due to layoffs, explosions, plant closings; people losing their homes; school bus accidents. Look in the GFSC library for helpful materials.
2. Take care of yourself, even as you are working with and caring for others directly or indirectly affected by this (or any) disaster.
3. Translate GFSC materials. Several volunteers are translating our workbooks (presently available in English, Spanish and Chinese) and other materials to French-Creole and other languages so that if/when a disaster strikes, these materials will be ready. Please contact BJ, [info@globalfacilitators.org](mailto:info@globalfacilitators.org), to participate in and/or support this project.
4. Share this newsletter and information about GFSC with others who can use our resources and/or support our goals.
5. Contact us ([info@globalfacilitators.org](mailto:info@globalfacilitators.org)) if you are interested in a GFSC workshop/webinar.

**2010 GFSC Board**

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**Gratitude/Gracias**

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Slingshot Media, <http://www.listcast.com> for our newsletter distribution and email list service

GFSC Advisory Council for their patience, expertise, advice and caring.

**Recent Additions to GFSC Library****[Vicarious Trauma: Bearing the Pain of Others in a Disaster](#)**

How to help people affected by Vicarious Trauma

**[Bearing the Pain of Others: How to Help the Helpers](#)**

Practical suggestions for recognizing and taking care of yourself and others in helping roles

**[Working With Groups After A Crisis](#)**

*Sharing, Processing, Learning.* Suggestions for working with people under stress, beginning 3-5 weeks after initial rescue/recovery, when the shock and initial reactions wear off and the emotional impact and overwhelming long-term effects begin to sink in.

**[Bad Things Happen to Good People](#)**

What is important when coping with the painful, but normal, necessary feelings that are part of every crisis and loss.

Visit the [GFSC Library](#).

[<http://globalfacilitators.org/VirtLib/VirtLib.htm>]



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