

Burnout:

Why do people suffer, and Why do International Relief Workers suffer more than Domestic Response Workers and First Responders?

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I had been in the Congo for over 2 years, longer than any other expatriate in town. I was already scheduled to leave in 2 months and frankly my heart had already left. It was about noon when the thunder started, not a rare occurrence when you live in a rainforest. It took about 45 minutes for the staff to realize that this thunder was different; it was actually the lava moving through the ground towards the volcano. I looked up at the volcano about 4 kilometers away and saw smoke and fire. The lava was going to run right through town, right through everything that we had worked to improve for the past 10 years. My local staff was going to lose everything. I knew what I had to do; re-route aircraft to other locations, empty the cash from the safe, destroy sensitive documents, arrange an evacuation for staff members and their families and notify our head office. I did all of this with my normal efficiency but not with my normal heart. During all of this work only one thought was going through my head....this is going to take weeks to deal with, surely they are going to cancel my vacation. I am burned out. (MacGregor, 1997-2005)

Terms such as burnout, compassion fatigue, and post traumatic stress disorder (PTSD), are all used to describe situations where individuals, through the experience of a severe single event, or a combination of long term stressful events experience a noticeable change in their psychological and physical health and well being.

The existing academic literature focuses on PTSD in reference to soldiers and survivors of single traumatic events. In recent years much research has been done on the survivors of the South East Asian Tsunami and Hurricane Katrina. In addition, there is a great deal of research on health care workers particularly those who work with terminal or psychologically impaired patients.

The business world has also done significant research on the effects of long term intense stressors and overwork on the physical and mental health of executives. These studies are often motivated by a fall in productivity of departments and industries due to the 'burnout' effect.

Police, fire and ambulance services are another segment of employees on which a significant proportion of research has been conducted with respect to burnout and compassion fatigue.

Despite the fact that disaster workers share the work loads, exposure to traumatic events and often prolonged exposure to stressful situations, there has been little research done specifically on the risk of burnout for disaster workers. Additionally there has been virtually no research done on the effects that burned out disaster workers can have on the populations that they are tasked with assisting. Two agencies, Antares Foundation and Headington Institute, based in the Netherlands and the United States respectively have been formed since 1999 to address this gap in research and literature. Both of these agencies are dedicated to providing support to disaster response and humanitarian aid staff members across the globe. Although they have made some inroads towards providing psychological support mechanisms and training

they have indicated that “there is a serious lack of studies about the consequences of extreme stress to relief workers, and what agencies can do to appropriately manage and support staff and worker productivity.” (Cardozo & Rijnen, 2008) In a study of PTSD in cross-cultural assignments for missionaries and aid workers in 2007, it was indicated that, “To the best of our knowledge, no study has been undertaken to examine traumatic exposure and factors associated with post traumatic stress among missionaries or aid workers while working long term in cross-cultural settings.” (Schaefer, et al., 2007)

With the exception of in-house manuals and a few trade publications the available research specific to the field is very limited. Even the few articles that do exist use the literature from the medical field and that of police officers and fire fighters as a basis for many of their long term conclusions.

The following paper will examine the available literature in the areas of PTSD, burnout and compassion fatigue in relation to western first responders, western domestic disaster workers and international relief workers. The paper will focus on the environmental situations that put these groups at risk for burnout as well as the other stress inducing factors. The paper will provide discussion and analysis of the major contributing factors to burnout in an effort to determine which of the established groups is at higher risk of developing burnout symptoms.

The paper will conclude with a short discussion of the recognizable signs of burnout in all response workers and identify a number of potential mitigation strategies that response agencies can employ to treat their staff members.

For the purposes of this paper first responders include those domestic workers in the western world that respond to small incidents on a daily basis and include such professions as police and fire, emergency medical services, and emergency room staff. Domestic disaster workers include those individuals who would typically be called on to respond to disasters in a community in the western world. These would generally be federal, provincial and regional government groups, local service agencies such as the Red Cross and St. John's Ambulance and other commercial agencies that may be involved. It is understood that in a western domestic disaster first responders would be important players in any response.

International relief workers include individuals who are deployed in international settings, primarily in the developing world, for the purpose of assisting those communities to recover from natural or manmade disasters and complex emergencies.

Burnout Described

Burnout is described as “a syndrome of emotional exhaustion and cynicism that occurs frequently among individuals who do ‘people work’ of some kind.” (Maslach & Jackson, 1981) Those experiencing burnout are likely to feel disconnected from the very people that they are tasked with helping, leading them to feel emotionally exhausted and unable to give of themselves in a truly meaningful way. These workers may continue to report to work and fulfill their duties but the caring aspect of their work is usually missing. The workers suffering from burnout are likely to have negative feelings toward those they are working with and for, and this can lead to feelings of dissatisfaction with the job, their co-workers and their organization.

The literature currently available, consistently points out major symptoms that are prevalent in all cases of burnout; exhaustion, depersonalization and lack of personal accomplishment. (Demerouti, Verbeke, & Bakker, 2005)

Exhaustion refers to mental, emotional and physical fatigue and is most often related to the number of pure hours that a person is required to spend on a specific task or duty. Depersonalization is related to the emotional detachment that an individual begins to feel from the people they are working with and the task that they are meant to be doing. For example a nurse can put in an IV and change a patient's bed sheets if she is suffering from burnout but the patient will feel the difference in personalization from the nurse who is suffering.

Lack of personal accomplishment is expressed in the burned out individual by feelings of inadequacy and poor self-esteem. A burned out firefighter who saved the lives of 10 people in a response event may still feel inadequate if they were not able to save the family pet.

Causes of Burnout

Regardless of whether one is talking about a corporate executive, an emergency room health worker, a firefighter or an international relief worker there are more similarities than differences in the causes of burnout.

The Maslach Burnout Inventory has identified some the conditions that contribute across industries to the development of burnout in individuals. (Maslach & Jackson, 1981)

Not surprisingly, it has been determined that those who work excessive hours at any job over a period of time are more susceptible to burnout symptoms. Research shows that those who have a higher level of customer contact also increase their chances of developing burnout. In this case, customer is defined as anyone outside of the organization such as a patient or a client. The lack of consistent feedback on job performance is also a major contributor to burnout. This is tied to the final burnout indicator of personal growth opportunities. Those who feel that their job does not allow them to grow as a person are more apt to experience burnout symptoms.

The National Comorbidity Survey concluded that the prevalence of post traumatic stress disorder in the general US population is 2.2% with those in the borderline category being 4.4%. A cross-sectional study of returning aid workers conducted by Davidson, Tharwani and Connor in 2002 estimates that their rates of PTSD and borderline PTSD are 10.0% and 19.0% respectively. (Schaefer, et al., 2007) There is not available comparable data to show the rates for domestic first responders and disaster workers but it is reasonable to assume that they would fall somewhere in between these two numbers.

Comparison of Burnout Factors between Types of Responders

The following figure is a compilation of burnout factors outlined across the literature that allows for a comparison of degree of exposure of different responder types. The figure is explained in greater detail in the following section of the paper.

Figure 1: Comparison of Burnout Factors between Types of Responders

Burnout Factor	First Responder *	Disaster Workers	International Relief Worker
Direct exposure to death and trauma	Regular contact.	Regular contact.	Regular contact.
High direct contact with beneficiaries or victims	Daily direct contact.	Daily direct contact.	Daily direct contact. Often living in the same or similar conditions as the victims
Quantity of work (hours in excess of a normal 40 hour work week)	Generally regulations exist to limit work shifts.	Regulations may be waived during a disaster causing double shifts.	On-call 24/7 is an expectation of the job.
Frustrations with bureaucracy	May exist but are routine.	Exist	Exist
Physical and Social Isolation	Rare	Rare	Common, separated from friends and family
Cultural disconnectedness	Generally working in home culture.	Generally working in home culture.	Commonly working in a different cultural context.
Inability to control immediate environment	High control as there is established routine.	Disaster environment unstable.	Disaster environment and housing situation highly unstable.
Unrealistic expectations	Some	Often	Often
Length of exposure	Continuous low grade	Intense for short time	Intense for long time
Fear for personal safety	Possible for police and fire, rare for other first responders	Rare	Common due to the insecure locations of deployment
Stress management training and preparedness.	Highly evolved systems and training.	Some systems and training.	Few systems and training.
Need to make life-altering decisions for others	For direct victim	For families and co-workers.	For large communities and co-workers.

* For the purposes of comparison First Responders are treated as a separate group. It is understood that during a domestic disaster these same people become disaster workers thus adding to their potential for experiencing burnout.

Sources: (Maslach & Jackson, 1981), (Benedek, Fullerton, & Ursano, 2007), (UNCHR HQ Staff Welfare Unit, Career and Staff Support Service, 2001), (Schaefer, et al., 2007) (Danieli, 2002)

The following section of the paper will look at the different stressors, organizational structures and physical situations of international relief workers, domestic first responders and domestic disaster response workers. The discussion will highlight the differential impacts that various stressors have on each of these groups and thus highlight each group's potential for developing burnout symptoms.

Direct exposure to death and trauma

First responders, domestic disaster workers and international relief workers all have the potential for direct exposure to death and trauma on a regular basis. First responders generally have established systems in place to handle this type of situation including ambulance services, staffed hospitals, and drugs to reduce victim pain. The first responders in this instance are generally able to do something to assist the victim and/or their family. They also have someone to talk to following the event in order to work out any distress that they may feel with regard to their role in the situation.

In the case of a disaster worker, normal channels may be blocked due to the disaster thus leaving them fewer options to deal with a victim in trauma or to deal with the family members of the victim. Roads may be blocked or hospitals may be overloaded. This situation requires the disaster worker to have more direct contact with the victim as they are forced to think through alternative solutions rather than simply feed them into an established system.

The international relief worker may be faced with a total lack of options to deal with death or severe trauma. Hospitals and drugs may not exist and may never have existed

in the immediate area. The international relief worker is therefore forced to watch victims die or watch bodies rot and be able to do nothing other than witness the event.

High direct contact with victims

First responders are in daily contact with victims within an established system. They are, however, able to go home to their friends and families at the end of the day and are able to separate their work lives from their home lives at least geographically. Disaster workers are also in daily direct contact with victims but with less structure and systems to separate them. During a disaster situation these workers, or their families, may to a certain extent, be victims themselves. In any case their opportunity to separate their own lives from those of the victims may be less than for first responders.

In contrast, international relief workers generally live in the same community as the victims with similar hardships. Water, communications and electricity shortages suffered by the community are shared by relief workers.

For seven years, I lived among those whose lives had been torn to pieces by rockets, mines, executions, rape, torture and an unspeakable climate of fear that could shatter the sanity 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 the environments for which no human being is prepared.

Yasmine Sherif, UN Worker (Danieli, 2002)

Quantity of work (hours in excess of a normal 40 hour work week)

First responders operate in an established system with scheduled shifts and basic regulations regarding how long someone can work in a given period of time.

Disaster workers, although they have plans that call for backup shifts often end up working in excess of them during emergency situations.

International relief workers have an organizational and personal expectation to be on call 24 hours a day 7 days a week. Offices are often in the same building where the relief workers are living, thus work essentially never stops. In addition, relief workers tend to live in communal settings with their co-workers so even when they are not officially working there is the practice of discussing work issues over meals and in the evening. Individuals are not able to get away from the work hierarchy thus there is little opportunity to tune out from the disaster situation.

Physical and social isolation

In the case of both first responders and domestic disaster workers the areas of work are generally within their own home region. They are able to have contact with their family and friends and enjoy most of the comforts of their normal lives. First responders are generally working within a group of colleagues with which they have a high degree of familiarity and comfort. Domestic disaster workers too are generally deployed close to their family and friends and are working with known colleagues.

International relief workers, by virtue of their job are deployed at a great distance from their family and other social support networks. They are commonly assigned to a team

of colleagues that they are meeting and working with for the first time thus have to create a social network with little history to build upon. In addition, it is not unusual for workers to be deployed to isolated areas with little communication capabilities, few non-work related activities available and with restrictions on freedom of movement. Basic living conditions such as unfamiliar food, extreme weather and even the lack of water for personal hygiene contribute greatly to the stress of the job for relief workers. The most common complaint of relief workers though is the loneliness:

The worst is the loneliness....Bissau is a non-family duty station. I even lost my dog Indy, my pet for 6 years in the evacuation. ... Every night in Bissau, I came home at 9 or 10pm, knowing that no one waited for me in the darkness, not even Indy.

Hiro Matsumara, WFP Country Director (Danieli, 2002)

Cultural disconnectedness

As mentioned above both first responders and domestic disaster workers are generally deployed in close proximity to their homes and thus are not, on the whole, at risk from having to deal with the cultures of different countries. That said, during a disaster, both of these groups, will have to deal with the different cultures of the combination of agencies that must become involved during a response. The cultures of the police, fire and emergency medical services may differ considerably and during a disaster they may have to work together much more closely than during normal times.

International relief workers have the same issues of organization culture having to deal with multiple agencies such as local governments, Non-Governmental Organizations, the United Nations and various military players. This merging of organizational cultures is further compounded for the international relief worker by the multitude of different national cultures and languages that are evidenced across organizations and within their own organization.

Inability to control immediate environment

The extensive training and rehearsing of their roles that is common to most first responders allows them a degree of control over their immediate environment. An emergency room is set up such that everyone there from the security guard who opens the door for the stretcher to the trauma nurse who hands needed instruments to the doctor almost before they are requested is a well oiled machine. This allows the participants in this response a certain degree of predictability and control over their environment.

During a disaster both the domestic and international worker are faced with situations that are changing on a daily, or even hourly, basis. Often the situations that these workers are being faced with are new and have never been trained for. The lack of control and predictability is a huge contributor to increased stress levels.

Unrealistic expectations

The jobs of the first responders, by virtue of them doing them every day, have established expectations. This is not to say that the firefighter who is unable to save

someone is able to get over this easier or the paramedic who loses a patient does not feel a sense of loss or frustration, but there is a general support from the community and colleagues that this is a normal part of the job and that not everyone can be saved every time.

In a disaster situation, workers are faced with communities, managers, press and co-workers who expect them to be able to “fix” the situation in record time. Politicians and individuals who were against spending money on disaster mitigation efforts weeks before may now be the first ones to complain when a disaster is directly affecting them. Individuals have the expectation that they should be taken care of immediately and to the same standard of care that they would have expected prior to the disaster.

In many cases the work of the international relief employee is easier as disaster victims in the developing world have much lower expectations. In addition, in most cases, the Tsunami being the largest exception, they are able to do their work without the watchful eye of the media.

Length of exposure

The length of time that an individual is exposed to the stressors of a job increases their chances of suffering from burnout. First responders, such as firefighters, nurses, and paramedics are likely candidates as they are exposed to stressors on a daily basis. These workers, however, do have the option of calling in sick or leaving their employer with little notice if the stress gets to be too much.

International relief workers who are based in the field for long periods are exposed to the stressful environment 24 hours a day 7 days a week. There is a significant difference in this experience for relief workers as they do not have the option that domestic workers have of simply being able to quit or to call in sick. The relief worker is commonly based in a remote area where getting to an international airport is logistically difficult and the purchase of an airline ticket home must be done through the organization. In addition, the stress of leaving the job before a replacement arrives may be more than the stress of staying. The relief worker knows that there is not likely to be a replacement for many months and that beneficiaries will suffer if the program is understaffed. Many of these staff members stay in unhealthy situations due to the guilt involved in leaving their friends and colleagues behind.

Domestic disaster workers have intense exposure to traumatic events but these are usually for short and finite periods of time.

Fear for personal safety

Studies have shown that having a fear for one's personal safety greatly increased their likelihood of suffering burnout symptoms. (McFarlane, 2004)

In the groups that this paper is looking at, this fear is quite reasonable for some of the categories of first responders at least some of the time. Firefighters and police officers have a reasonable expectation of personal injury on a regular basis and even emergency room personnel and paramedics are regularly placed in situations that are potentially personally dangerous.

It is possible that a domestic disaster response worker would be placed in a personally dangerous situation such as those who were working at the Superdome during the Katrina response, or those sifting through the rubble at ground zero, but these would be rare occasions in the career of a domestic disaster response worker.

Due to the locations of the responses for many international relief workers and the threat of political violence, tropical disease and lack of communication and emergency health facilities the fear for personal safety is a 24 hour concern for most of these individuals. (McFarlane, 2004)

Stress management training and preparedness.

It has been proven that there are a number of ways to mitigate the effects of stressors on individuals and to prepare psychologically for traumatic situations. First responders are generally well aware of these potential situations and have undergone regular training exercises and feedback sessions on how to deal with them. First responders are also commonly provided with psychological health services and regular counseling to deal with the stresses of their job.

Many domestic disaster response workers are less prepared for what they may see during a disaster. Despite simulations and other training exercises their opportunity to gain experience in an actual disaster situation is limited.

Given the number of disaster responses that career international relief workers are exposed to the training and preparedness that these workers receive is extremely limited. It is not uncommon for a first time relief worker to receive less than 48 hours of

pre-deployment training and the majority of this is focused on the functional and administrative aspects of their job rather than on preparedness for the traumatic events that they will no doubt experience.

Need to make life-altering decisions for others

First responders may be forced to make life-altering decisions for individuals in the course of their work when they have to triage one victim over another.

Domestic disaster workers may face decisions that could affect large groups of people in the case of a large scale event. Given that western nations generally have a lower level of vulnerability than does the developing world, the domestic disaster worker is rarely faced with a decision to make that will cause large segments of the community to suffer unduly.

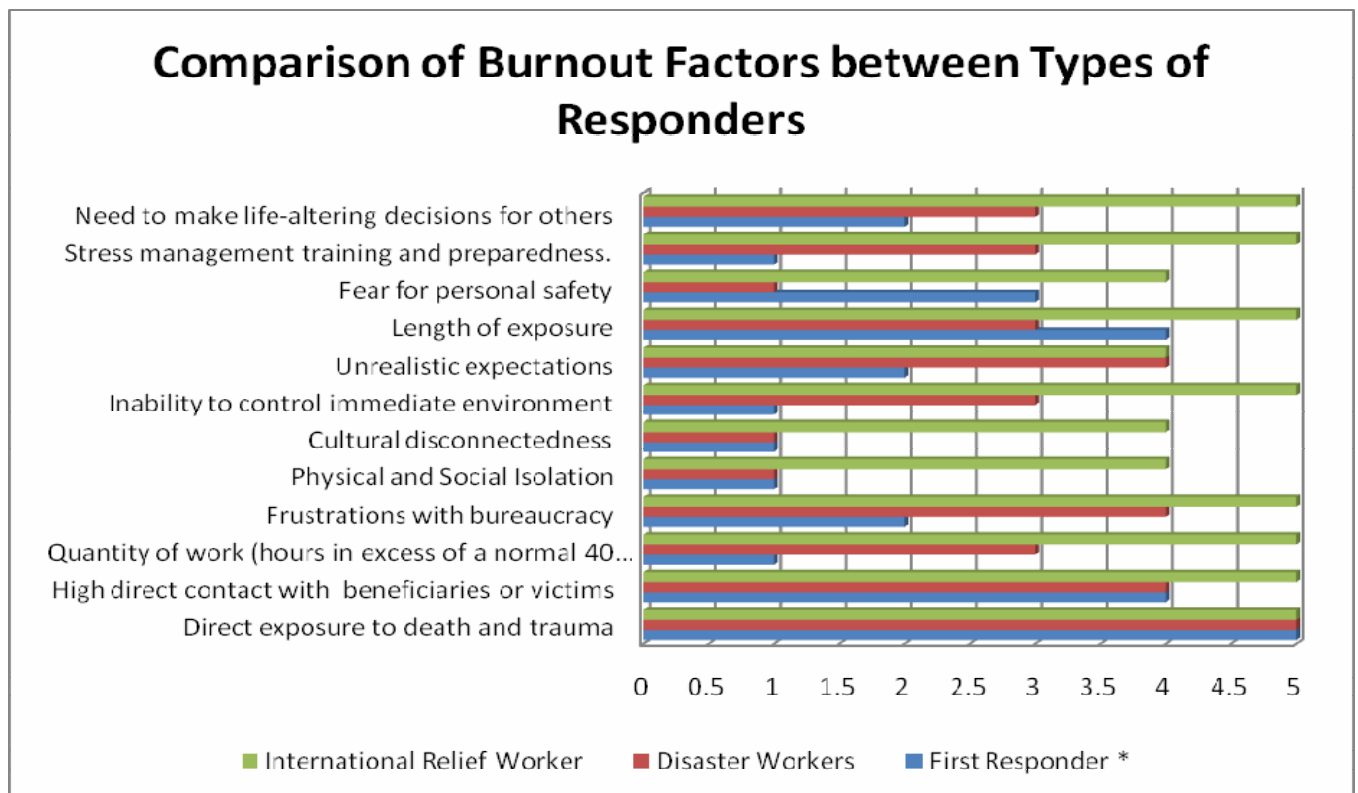
Although this factor is not often talked out in academic literature with respect to domestic disasters, it is one indicated by most international relief workers as causing them the most enduring stress.

The most overwhelming gut-wrenching challenge for me was far more insidious: each day became a relentless series of life-and-death decisions. Decisions, for example, on where food and supplies could be delivered, which in turn determined who would eat, who would freeze, who would get shelter from the rain. I am convinced there is no way to prepare oneself for this level of responsibility. From the day I arrived in Burundi until the day I left, these decisions bore down on me – and never got easier. They haunt me still.

Kathleen Cravero, UN RC, Burundi (Danieli, 2002)

The following figure shows a graphical representation of the above discussion by applying numbers between 1 and 5 to the levels of burnout described in Figure 1. This shows clearly that although all three groups are exposed to stressors associated with burnout there is a difference in the degree of exposure between them. International relief workers are most highly exposed followed by first responders and finally domestic disaster workers.

Figure 2:



Miscellaneous Factors

Research shows that younger individuals are more susceptible to PTSD and burnout than are older people and that married people have a higher degree of resilience to the

effects of typical burnout factors than do their single counterparts. (Long, Meyer, & Jacobs, 2007) These factors may exacerbate conditions for international relief workers and first responders as both of these groups tend to be younger and therefore are less likely to be married.

Researchers do not seem to have taken into account the other explanation for the fact that single and younger people seem to have higher rates of burnout. In group settings where there are both single and married people there is a tendency to allow those people with spouses and children to leave early and to take more time off where the single person without children is often expected to pick up the slack thus causing them to put in more time in stressful conditions than their counterparts.

The same phenomenon holds true for younger people who are expected to work longer hours in more difficult conditions strictly because they are younger and thus expected to be stronger and more resilient.

Why more people are not suffering.

Given the above arguments, how does one explain the fact that the majority of disaster workers whether they be first responders, domestic disaster managers or international relief workers are not diagnosed with burnout.

Maslach's study of burnout factors points out that one of the major factors that influence the potential of an individual has of suffering from burnout is the level of perceived personal accomplishment. (Maslach & Jackson, 1981) Individuals who are likely to go into the fields of first responders and disaster workers are generally those who gain a

great sense of personal accomplishment through the act of helping people in need. The satisfaction that they get from this aspect of their job may go a long way towards mitigating the effects of the other factors that contribute to their burnout potential.

The length of a career in each profession may also be a factor as to why, given the stressors, that there are not more people in each profession suffering from burnout at any given time. Those in the traditional first responder professions have a career path which often moves them out of direct traumatic contact with victims after a relatively short time and into the areas of supervision and management. Often it is these individuals who move into the role of domestic disaster response workers where they use their experiences and coping skills to assist them to deal with the stressors of their new jobs.

International relief workers, as well, generally do not work in the direct delivery of assistance for much beyond 10 years. Those that remain in the field beyond this time frame generally are promoted to regional or global supervisory positions where their contact with victims and their families is virtually eliminated.

Recognizing Signs of Burnout in Response Workers

Individuals suffering from burnout may exhibit a number of different symptoms which may be expressed physically, emotionally, behaviourally or through their attitudes.

Physically one may suffer from headaches and intestinal problems or have difficulty sleeping. Emotional symptoms may include anger, frustration or extreme over or under reaction to events. A burnout sufferer may suffer from poor performance coupled with increased risk taking behavior and an unwillingness to take time off. Finally someone

suffering from burnout often displays cynicism towards their organization or line of work and distrust of those around them. (UNHCR HQ Staff Welfare Unit, Career and Staff Support Service, 2001)

Mitigating the Effects of Burnout on All Responders

Just as the factors that contribute to burnout are similar across types of responders, the same activities and strategies can be used to mitigate burnout for all responder groups.

The primary way to avoid the on-set of burnout is to maintain basic good health which includes eating a well balanced diet, participating in regular exercise and getting proper rest and sleep. Creating a balance between official and private life is also an important mitigating factor as is finding a way to take a mental break from stress. These may sound simple but in many cases food provided to response workers is purchased based on convenience rather than nutritional quality and time for exercise and rest is difficult to find in the midst of an emergency. (UNHCR HQ Staff Welfare Unit, Career and Staff Support Service, 2001)

Managers and organizations can also do a few things to increase the resilience of their employees, the most important one being the setting of a good example. The manager who works 18 hours a day and never takes a day off creates similar expectations for their staff and virtually ensures that at least some of their staff members will burnout over the course of a long term response. The same is true for the manager who has unrealistic expectations of their staff members. Organizations can provide training programs to their staff prior to responses such that they know, to a certain degree, what to expect and how to respond. Perhaps one of the most important things that an

organization can do is to provide a culture in the organization that recognizes the inherent stress in the job and provides support programs that are not only available but mandatory for staff members. (Danieli, 2002) Often just knowing that their feelings are normal and having someone to talk them through with is enough to prevent long term psychological damage to staff members. Having resilient and experienced staff members working at capacity during any kind of response is the best possible situation for both the victims and the response agencies.

Conclusions

The term burnout is used quite casually in every day conversation yet it is a very real and debilitating condition that has the potential to impact large numbers of individuals. Although the context of this paper focuses on the effects of burnout to disaster response workers the inherent sub-text is that when response workers are suffering their ability to work at full capacity is compromised and thus the victims of disasters will suffer as well.

The above paper clearly shows that there is a significant disconnect between the primary sufferers of burnout in the disaster field, international relief workers, and the body of existing research. This is not surprising as it is in line with the body of disaster research in general with the majority of papers focusing on the events and problems of the western developed world. There is significant opportunity for researchers to look at the issue of burnout in international relief workers in more depth.

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