Burnout, Secondary Trauma, & Compassion Fatigue in Disaster Mental Workers
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ABSTRACT

- This phenomenological study of Disaster Mental Health counselors will include interviews with 25 participants. The themes to be explored include: secondary trauma as a primary, proximal experience; compassion fatigue as a "solo" phenomena; and burnout experienced as response to administrative processes.

PROCEDURES

Twenty five participants (five field supervisors and 20 counselors with a range of one to multiple Disaster Response teams) will be interviewed from organizations including the Red Cross, NOVA, and the Florida Crisis Response Team. The interviews will take approximately 90 minutes, and use a semi-structured interview guide.

RELEVANT LITERATURE

The call for mental health counselors to serve at the frontlines of natural and man-made disasters as part of the relief effort has grown significantly (US Bureau of Labor Statistics, 2010). These professionals are exposed to stresses beyond the conventional counseling relationship. Recent studies have attempted to understand the stresses and risks associated with providing mental health counseling. These stresses have been conceptualized as "secondary or vicarious trauma" (Bride, 2004; Collins & Long, 2003); "burnout" (Figley, 1995) and "compassion fatigue" (Collins & Long, 2004; Figley, 2006; Pearlman & Saakvitne, 1995). These conceptualizations have in common the theme of increased vulnerability to physical and psychological consequences when dealing with the traumatic life events of others.

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DATA ANALYSIS

Data will be transcribed by an independent transcriptionist. N-Vivo will be used to analyze data using a variation of Moustaka's (1994) phenomenological method.

RESEARCH QUESTIONS

RQ 1: What are the prominent experiences of counselors that shape the meaning of disaster response work?
RQ 2: What is the meaning of secondary trauma, compassion fatigue, and burnout to disaster mental health workers?
RQ 3: What themes emerge to describe how mental health workers cope with the challenges of working in traumatic events?

CONCLUSIONS

It is hoped that the results will contribute so that:
1. Mental Health Professionals will learn how Disaster Response experiences can differentially affect their emotional well-being.
2. Professionals will also how to mentally and emotionally prepare for these efforts in order to better serve people in need.
3. Educators and researchers will be able to use the model in classrooms, and in directions for future research.

FINDINGS

Data will be gathered late Spring and early summer.

LIMITATIONS

Of course, qualitative research like this is limited in generalizability because of small, purposeful sampling, and idiographic perspectives. However, the identification of common themes across a diversity of experience will provide insight for planning future studies on training and support of disaster mental health professionals.

PURPOSE

The purpose of this research is to explore the experiences of disaster response mental health professional. Their experiences may be able to inform us about the emotional and psychological consequences of this work. Further, it may help training programs better prepare counselors.

SOCIAL CHANGE IMPLICATIONS

Disaster Mental Health Work is an important, contemporary topic. As more mental health professionals volunteer for such events, the counseling profession is called upon to understand and help mitigate the emotional consequences of these humanitarian efforts. This effort can potentially contribute to the training of disaster mental health counselors, as well as the prevention of the consequences of working in this acute traumatic environment.