



# **STRESS IN THE FIELD**

*Practical guidelines  
for dealing with  
ongoing stress and shocking events  
in the field*



**Psycho-Social Care Unit  
MSF Holland  
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## ***1 INTRODUCTION***

Working for a humanitarian aid organization in the field is not one of the easiest jobs to fulfill. This fact requires your attention. You need to devote a lot of effort to dealing with the ongoing and cumulative stress of fieldwork. Moreover, you need to be aware of the psychological effects that a shocking event may have on you and the other members of your team.

Many books and articles have been written about stress and stress management. The guidelines in this booklet were derived from numerous missions by the Psycho-Social Care Unit to the field and countless debriefings at Amsterdam HQ of people returning from the field.

This booklet describes, first, the meaning of ongoing stress in the field: how it affects you and your team and what can you do to improve the way you cope with stress. Secondly, this booklet outlines the psychological impact of a shocking event, and provides some guidelines on how to deal with the aftereffects of a shocking event.

Stress is a normal and natural phenomenon. The way each of us reacts to stress is, of course, determined by various factors. Personality, cultural background, previous history, and situational factors such health or finances all determine our “style” of coping with stress. You need to learn to recognize your own idiosyncratic ways of responding to stress. An understanding of how stress affects you physically, mentally and emotionally will help you take an active approach to stress and deal with the stress in your life more effectively.

Stress is sometimes easier to spot in others than in yourself. Whenever you take time to inventorize the stress that you experience in the field, you are taking yourself and your team members seriously. We sincerely hope that this booklet, with its practical approach towards stress management, will contribute towards your well being and that of your team members.

## **2 THE PSYCHOSOCIAL CARE UNIT**

The Psycho-Social Care Unit (PSC Unit) at MSF Holland was formed in 1993 on the assumption that the kind of stress that is involved in working in for a humanitarian aid organization implies that specific psychosocial support should be available to people who work in the field.

### *Who are we?*

The PSC Unit is a team of professionals headed by Piet van Gelder and Reinoud van den Berkhof. Els de Voogd is the assistant.

The members of the PSC Unit are volunteers who work in various sectors in the field of mental health (clinical psychology, psychiatry, and social work). The following members of the PSC Unit are available at Amsterdam HQ on certain days of the week: Will de Jong, Jolanda van Melick, Nicky Cohen de Lara, Els Kamer, and Jan Koolen. All the members of the PSC Unit are available for missions to the field in the case of an emergency.

### *What do we do?*

The services of the PSC Unit are offered as part of the ongoing support that MSF Holland provides to people working in the field. The PSC Unit offers briefings to field workers prior to their departure, and debriefings on return from the field. On request, consultation, coaching, or short-term therapy can be provided.

In the case of a critical incident in the field, the country manager may request the assistance of the PSC Unit. A team of two members from the PSC Unit can be sent to the field at short notice. The team provides psychosocial care in situ for individuals who have been traumatized, and assists the team in dealing with the psychological aftereffects of the events.

The PSC Unit also provides training in stress management skills. A basic module on stress management is offered as part of the PPD for field workers. Advanced modules on stress management are provided for project coordinators, medical coordinators and country managers.

### *What are the rules?*

The services of the PSC Unit are based on the rule of confidentiality. No confidential information is shared with other departments.

### 3 *ONGOING STRESS IN THE FIELD*

#### *What is stress?*

Stress is the state that you experience when you are faced with a challenge, threat, or change and there is a possible imbalance between demands and resources. In other words, you experience stress when you are faced with a threat, as when someone approaches you with a raised fist. This explains why stress is sometimes called the *fight or flight response*. You also experience stress when you are faced with another kind of threat, for example, when someone questions your competence, or when you have to deal with a challenge, for example, when you make an important presentation, or when you need to finish a report before the deadline.

Stress arises, therefore, in the interaction between you and the environment:

- ⇒ You perceive a situation of challenge, threat, or harm.
- ⇒ You consider the outcome important to your welfare.
- ⇒ You are uncertain whether you will be able to successfully meet the challenge or deal with the threat.

All of us inevitably encounter challenges or threats in the course of our daily lives. In this sense stress is universal. However, stress varies from individual to individual due to a number of factors:

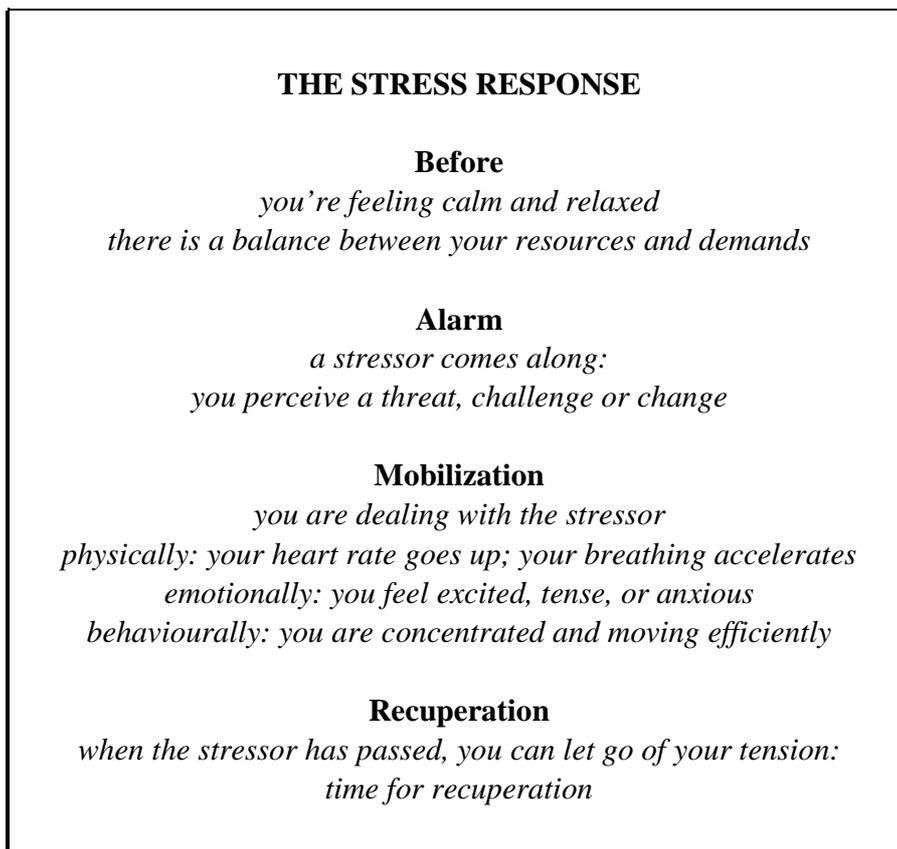
- ⇒ The situations to which we are exposed: potential stressors at a field project may be quite different from the stressors faced by a country manager.
- ⇒ The perception of events as stressful: both past experiences (cultural and personal) and present circumstances influence the way we evaluate situations.
- ⇒ The way we experience stress: physically, emotionally, cognitively and behaviorally.
- ⇒ The way we cope with stress: individuals differ in their coping styles

### ***The stress response***

Hans Selye pioneered the study of stress, which he considered primarily as a physiological phenomenon. Selye defined the way in which the body responds to a stressor as the “general adaptation syndrome,” indicating that the body’s response to a stressor always follows a certain pattern, namely, alarm, mobilization and exhaustion.

Selye’s work dealt largely with the study of the typical physiological reactions produced by physical stressors, such as cold and toxins. Nevertheless, his definition of the stress response can help us to understand the psychological meaning of stress.

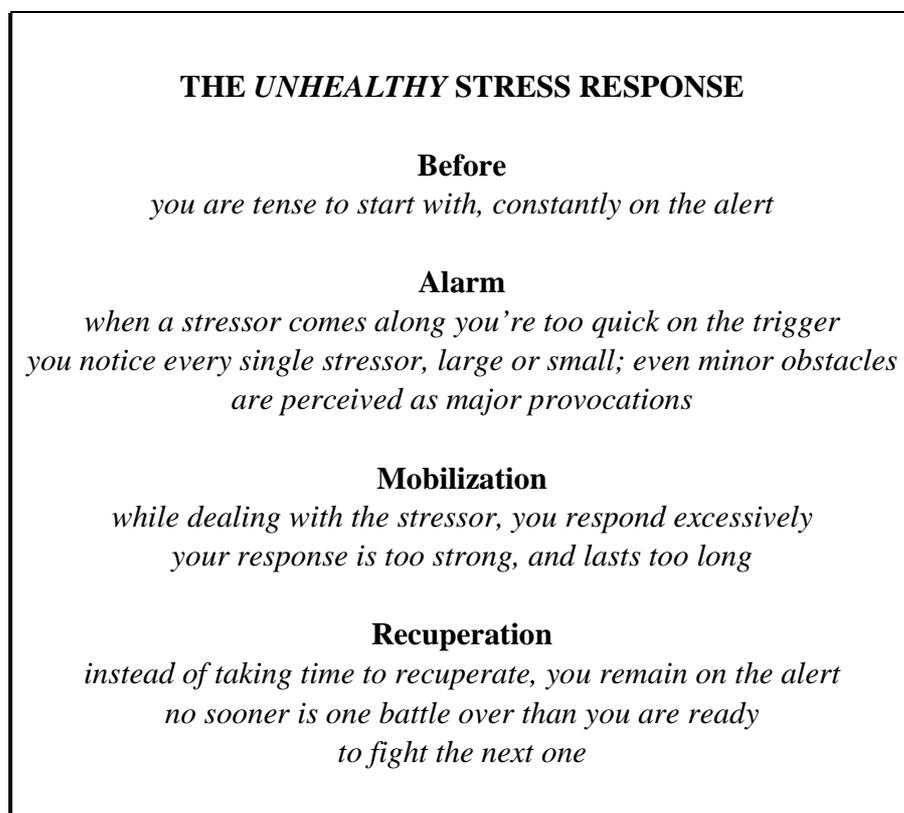
The psychological response to a stressor follows the same pattern: alarm, mobilization and exhaustion.



### *The unhealthy stress response*

We are all familiar with day-to-day stress. People all over the world say “stress starts with the alarm clock.” Actually, daily stress is quite positive. It helps us to get up in the morning, accomplish tasks, and seek out new projects and relationships that move us through life.

The stress response, as defined above, is a normal and natural part of everyday functioning. However, stress can become a negative phenomenon. Usually this means that you are going through the pattern of alarm, mobilization and recuperation in an unhealthy manner.



We can try to minimize the amount of stress in our lives, but stress cannot be avoided entirely; it is a part of everyday life. Therefore, it is essential that we learn to manage stress effectively. The stress response – alarm, mobilization, recuperation – points to the areas in which you can learn to deal with stress more effectively.

Thus, for effective stress management, you need to:

- ⇒ learn to be more selective in which stressors you respond to
- ⇒ learn to modulate the degree of your response to any stressor
- ⇒ learn to minimize the duration of your response
- ⇒ learn to maximize the benefits of your recuperation

### *Stressors in the field*

Any threat, challenge or change that triggers the stress response can be designated as a stressor. Stressors that trigger the stress response can be both *internal* and *external*. Getting stuck in a traffic jam, or a telephone that isn't working, for example, are typically external stressors. Examples of internal stressors, which can be just as effective in triggering the stress response, are worrying whether you are going to get fired, or realizing that you have forgotten an important appointment.

A single event stressor or a long-term stressor may trigger the stress response. An example of a single event stressor that triggers the stress response is sudden turbulence during an airplane flight. A long-term stressor is, for example, losing one's home in a fire. Long-term stressors are often related to life events such as a divorce or having a baby.

There are numerous stressors in the field. The following list gives an indication of some of the stressors that you may have to deal with.

- ⇒ *climate*  
extreme heat; humidity, extreme cold, rain, snow, mud, dust
- ⇒ *location*  
long distance between projects or between project and the capital
- ⇒ *relations at home*  
concerns about family or friends, lack of support, family expectations or demands

- ⇒ *culture*  
national or religious customs, cultural attitudes toward work / the organization / women, differences between expatriate staff and national staff
- ⇒ *transportation*  
bad roads, inadequate means of transportation, dependence on a weekly airplane for provisions
- ⇒ *insects and animals*  
mosquitoes, flies, snakes, scorpions, fleas
- ⇒ *hygiene and health concerns*  
risk of malaria, diarrhea, long distance to nearest hospital
- ⇒ *housing*  
lack of privacy, house situated in unfavorable location, house too small, frequent guests in the house
- ⇒ *food*  
strange food, unvaried diet, inadequate hygiene in the kitchen
- ⇒ *security and safety concerns*  
checkpoints, military movements, civic unrest, looting, holdups, distant shelling
- ⇒ *work*  
too much work; too little work, insufficient staff, too much staff, unclear assignments; lack of responsibility; lack of information; frequent changes in plans and procedures; lack of adequate materials (cars, radios, drugs, tents, stores, computers, telephones), inadequate office space
- ⇒ *team functioning*  
insufficient cohesion within the team, rivalry, differences in educational background or working experience, unclear communication between team members, or between field management and team members; composition of the team (men / women; couples / singles), differences in work attitude; conflicts

- ⇒ *team management*  
omission of proper handovers, insufficient functional feedback (appraisals, coaching, monitoring, supervision), unclear assignments or delegation of responsibilities, unclear decision making process, insufficient personal attention
- ⇒ *the organization*  
unclear procedures, unclear communication (radio, telephone), unclear expectations regarding objectives and reports from the field, unclear decision making process, unclear delegation of responsibilities, planning and control

It is important that you inventorize the stress in your life regularly! Use the above list of potential stressors in the field to reflect on the kind of stressors that you and your team are dealing with. Moreover, stress should be discussed regularly. It may be a good idea to be set STRESS on the agenda of any team meeting. For example, simply arrange that every team meeting starts with a short exchange about the stress that each team member is experiencing. This will promote awareness, the first step towards stress management.

### ***Read the signs!***

In the field, you may be exposed to many of the above stressors over a prolonged period of time. This means that you are going through the stress response repeatedly. Ongoing stress can be pervasive and subtle; it may be cumulative without you noticing.

When ongoing stress is not recognized and managed effectively, it can result in a disabling condition that is sometimes referred to as “burnout.” Burnout means that the unhealthy stress cycle has been repeated over and over again: there have been too many stressors, the periods of mobilization have been too long and too intense, and there has been insufficient time for adequate recuperation. The following symptoms may be an indication of burnout.

#### *Physical*

- exhaustion
- somatic complaints (indigestion, skin irritation, backache, headache, hyperventilation, high blood pressure)
- sleep disturbances

- sexual dysfunction
- nervous tics, nail-biting
- change in appetite

#### *Cognitive*

- concentration problems
- distractibility or inattentiveness
- problems with making decisions or setting priorities
- rigid, inflexible thinking; obsessional thinking
- diminished tolerance for ambiguity

#### *Behavioral*

- irritability / blaming others
- social withdrawal / isolation (at work or in the house)
- chaotic behavior / loquaciousness
- nonchalance regarding security; risk-taking behavior
- alcohol or drug abuse
- reluctance to start work / absenteeism
- lowered productivity
- long working hours / unwillingness or refusal to take a break or R&R

#### *Emotional*

- feeling pressured / overwhelmed
- negativism / cynicism
- feeling of alienation
- diminished pleasure / chronic sadness / depression
- suspiciousness / paranoia
- feelings of shame or guilt
- anxiety

#### *Spiritual*

- disillusionment / doubts about one's value system or religious beliefs
- questioning of major life areas (profession, job, lifestyle)
- self-preoccupation

### *Coping with stress*

People differ in the way in which they cope with stress. An individual's style of coping is determined by personality, cultural background, previous history, and situational factors such as health or finances. Nevertheless, some coping styles are more effective than others.

It is important, first, that you learn to recognize the way you typically cope with stress. Secondly, you need to try out new ways of coping. By learning to use various coping styles, you will increase the options that you have whenever the next stressor comes along . . . . .

The following coping styles have been distinguished:.

- ⇒ *active*  
taking a proactive approach, making an effort to solve the problem, taking initiative
- ⇒ *palliative*  
having a drink, smoking, using drugs, taking a hot bath, going to bed, meditating, doing relaxation exercises, reading
- ⇒ *avoidant*  
taking a break, leaving the room, leaving the project, going on R&R
- ⇒ *depressive*  
going to bed early, crying, not talking, avoiding people, ruminating
- ⇒ *social*  
talking, making love, going out together, making a telephone call, having a party, laughing
- ⇒ *passive*  
not doing anything, letting things take their course, ignoring the problem, "putting it on the back burner"
- ⇒ *expressive*  
shouting, letting people know how you feel, writing letters or emails, keeping a diary
- ⇒ *cognitive*  
thinking positive thoughts, telling yourself that things will improve, looking on the bright side

Obviously, some coping styles are generally more effective than others, but even going to bed early or having a good cry (depressive coping style) can be effective sometimes. Once you learn to use various coping styles, you will find that in certain situations it may be more effective, for example, to leave the room and take a break (avoidant) as opposed to sending an angry email to the country manager (expressive).

Changing habits of long standing is not an easy task, but everyone is capable of learning something new. Remember: you can't always control the world outside, but you can learn to control the way you respond to it.

## 4 *SHOCKING EVENTS AND THE PSYCHOLOGICAL CONSEQUENCES*

### *The meaning of a shocking event*

A shocking event is any event that has an intense emotional impact. A shocking event or “critical incident” is a sudden event that is outside the range of normal human experience and that overwhelms the individual’s coping mechanisms.

Shocking events that are outside the range of normal human experience are, for example, war, torture, natural disasters, major accidents, and physical or sexual assault. Common to each of these experiences is:

- it occurs suddenly and is overwhelming;
- it is a major threat to your safety or that of others;
- it causes fear and a sense of extreme powerlessness.

In other words, the event is so devastating and extraordinary that it is extremely hard to cope with the resulting emotions. A shocking event usually results in an emotional ‘scar’:

*trauma = wound*

Every individual is susceptible to the psychological effects a critical incident, regardless of his or her psychological stability or personality. People who work in emergency professions, such as doctors, nurses, fire fighters, and rescue workers, have an increased risk of being exposed to shocking events. Humanitarian aid workers also belong to this high-risk category of professionals.

In the field, you may be directly or indirectly involved in a critical incident. Examples of a critical incident are:

- a fatal traffic accident
- a physical attack with a weapon
- rape
- threats or intimidation by soldiers or para-militaries
- a sudden death
- acts of extreme cruelty
- erratic behavior (due to drugs or alcohol)
- any event involving harm or injury toward children

When a critical incident occurs in the field, many MSF workers find they can cope on their own or with the help of their colleagues, friends and relatives. However, there are usually some emotional or physical aftereffects. The extent and duration of these emotional and physical reactions determine whether help is needed. It is important that you know how to recognize these reactions.

### *Emotional reactions*

If you have been exposed to a shocking event you may experience a variety of emotions.

#### *Anxiety*

- about your physical welfare or that of others
- about collapsing or losing control
- about what the future will bring
- that the incident will reoccur

#### *Sense of powerlessness*

- about having been overwhelmed and out of control
- being unable to help or save yourself or others

#### *Sense of helplessness*

- feeling that nobody protected you
- feeling that nobody was able to control the situation

#### *Sense of deprivation*

- feeling deprived of material or moral support

#### *Guilt*

- about being alive while others did not survive
- about your actions or lack of actions
- about having caused your family and friends intense distress

#### *Shame*

- about not being sufficiently prepared
- about your emotional reactions
- about being relieved to have survived while others did not

#### *Anger*

- toward those who allowed or caused the situation to occur
- about the injustice or insanity of the situation

- about the shame and humiliation suffered by yourself or others
- about the lack of understanding
- that it happened to you and that others were spared

*Grief*

- about your losses (physical or otherwise)
- about the losses that others have suffered

*Despair*

- feeling depressed
- loss of perspective

***Physical reactions***

Following a traumatic event, you may experience certain physical complaints on top of the emotional reactions. These physical reactions to a shocking event do not necessarily occur directly; some may develop months later.

Common physical reactions include:

- insomnia
- lack of concentration
- short-term memory problems
- muscle tension
- headaches, backache
- palpitations
- dizziness
- nausea, diarrhea
- fatigue
- hyperventilation
- irregular menstruation
- reduced sex drive

### ***The healing process***

Any individual who has been involved in a traumatic event may experience the emotional and physical reactions described above. These reactions may be extremely intense, and the process may be very painful.

People tend to suppress painful emotions. Generally, this is a healthy mechanism: you cannot function well if you are feeling bad all the time. However, recuperation depends on your acknowledgment of these emotions. Only by repeatedly dealing with the painful feelings will you help yourself to complete the healing process. Denial will not allow the wound to heal and the scars to disappear; suppression may lead to other, more severe problems.

In the long run, facing the emotions instead of running away from them will ease the pain. In the long run the emotions become less painful, like a storm that slowly dies down. Do not be afraid that you will “lose control” or go out of your mind when you relive the events in your mind. Letting out your emotions will bring relief, and eventually lead you to the point that reliving the event occurs less frequently, and the pain loses its intensity.

It may take weeks or months, sometimes longer, before this healing process has been completed. You need not worry about your physical or emotional symptoms during this period, as long as they slowly become less intense and less frequent and you are gradually starting to pick up your life again.

Completing the healing process means that you have integrated your experiences into your life and that the wound that you have suffered has made you stronger.

### ***Protective factors***

Certain factors are beneficial to the healing process after a shocking event has occurred. In the initial phase after a traumatic event, you may feel as though you have gone on automatic pilot. You may feel that you are behaving automatically; you may experience a dazed state or a feeling of unreality, and you may not feel any strong emotions related to the event. This is termed ‘emotional numbing.’ The function of going on automatic pilot is that it protects you from being overpowered by unendurable emotions. This mechanism may be misleading for others, who may think that you are being brave or, instead, showing a lack of involvement.

Social support is an important protective factor. Practical and emotional support from friends and colleagues can greatly enhance the recovery process. Allow your friends and colleagues to perform this task! You will profit by having others share your emotional burden. In the end, the use you make of the support that others can provide will intensify these relationships.

### ***Risk factors***

Some factors can place you at greater risk for developing long-term psychological problems. These risk factors are:

- the nature of the event: long duration, excessive violence, isolation, large number of victims, children involved, colleagues or significant others involved
- earlier traumatization: former life events that have made you vulnerable for traumatic stress
- personal factors: past history of psychological or medical problems, personality (e.g. introversion), tendency towards identification with the victim(s), tendency towards intense guilt or shame, tendency towards denial of emotions
- alcohol or drug abuse; destructive and risk-seeking behavior
- reactions in the social environment: lack of acknowledgment, premature closure of the event, blaming, lack of trust, authoritarian behavior, insensitive or derogative comments, joking, isolation, sensation-seeking behavior

### ***Tips and advice for survivors***

The healing process develops with time. The following suggestions are ways in which you can promote your healing process.

- ⇒ *Tell your story*  
Talk about the event or write down what happened, in as much detail as possible. A factual reconstruction of the events promotes an emotional processing of the events. Although it may be extremely painful, go over every detail to get a complete picture of the events, and do this over and over again.
- ⇒ *Acknowledge the emotions*  
Realize that traumatic events always cause strong emotional reactions. You will not help yourself by suppressing these emotions or by bottling them up. Express your feelings, and allow your team members to share in your grief. Seek support and be honest about your needs. If someone is not sensitive to your problems, try to avoid a conflict, and make sure that you look up people who are more supportive. You may also want to express your emotions through writing, painting, music or some other creative activity.

- ⇒ *Facing reality*

The reality of the situation may help you to process the emotions that you have experienced. Facing reality can involve, for example, returning to the scene of events, attending a funeral, or reading the news about the incident. People tend to avoid this kind of activities, but facing the reality of the traumatic event may be beneficial to the healing process. If you have left the country after the incident, you may want to keep in touch with the project and your former co-workers.
- ⇒ *Physical condition*

Make sure that you take enough time to rest and sleep. Eat well, preferably healthy food. It is important that your physical condition is good. Remember, alcohol or drugs cannot resolve emotional distress -- don't use them to find relief.
- ⇒ *Take time*

Don't expect the memories and emotions connected to the traumatic events to vanish quickly. You will have them with you for many weeks or even months. Continue to share these memories and emotions with others; even if it seems odd these thoughts and feelings keep bothering you. They will become less overwhelming in time..
- ⇒ *Structured activities*

Make sure that you have a structured plan for each day or week. Structuring your day can help you get a grip on your emotional turbulence. After the initial phase following the traumatic event, you must avoid becoming passive. Arrange for specific periods for relaxation, thinking things over, and talking to friends and colleagues. It may be helpful to spend your time productively, for instance, by helping others. (Too much activity, however, can be damaging, as it may shift your attention from your own needs to that of others.)
- ⇒ *Privacy*

In order to cope with your emotions it is important that you regularly spend some time alone, or with close friends or relatives only. There may be a lot of pressure to talk to more distant friends who also want to spend time with you, but try to limit the number of people around you
- ⇒ *Medication*

If necessary, you can use a tranquillizer or sleeping pill for a short period of time. Oxazepam is good choice. However, caution is required in the use of tranquillizers or sleeping pills, as they may aggravate the dazed feelings that occur after a traumatic event. You must avoid becoming dependent on tranquillizers.

⇒ *Decision making*

Postpone any important decisions that are not directly related to the traumatic events. Do not take significant steps such as ending a relationship, moving house, or making substantial financial changes. Avoid making this kind of decisions until the healing process has been completed.

⇒ *Previous experiences*

Be aware that the feelings of grief or fear from the traumatic event may resurface if you are exposed to another critical incident. Even a minor unexpected event may trigger these feelings.

**WARNING** People under severe stress are at greater risks for accidents, because of their concentration problems and inadequate attention span. Take special care when you are driving a car or performing some other activity that requires your full attention.

***Tips and advice for family, friends and colleagues***

A critical incident can be devastating for any individual. When a shocking event affects someone you love, you may feel helpless and shocked yourself. However, the event may have positive effects as well. Survivors often develop a greater appreciation of the meaning life. Bonds with colleagues and significant others may be strengthened. New contacts may be established and different viewpoints discovered.

Nevertheless, a critical incident may also lead to tension in existing relationships. Negative feelings may dominate the relationship and place group functioning under pressure. Survivors may feel that they are receiving the wrong kind of support or insufficient support. Since others do not always know how to react, feelings of isolation are quite common in individuals who are trying to cope with the emotional aftermath of a traumatic experience. Some may feel unable to return the emotional closeness. Irritations and conflicts can easily arise. As a result, survivors may feel extremely distressed and isolated.

Friends and family can be extremely important in helping the survivor deal with the aftereffects of a critical incident. There are four important rules.

- ⇒ Clarify the survivor's needs through open communication. Without being too intrusive, you can ask the survivor what you can do for him or her. Do so regularly; don't be afraid to raise the subject.
- ⇒ Realize that in the initial phase the survivor can be in a state of shock. He or she may alternate between emotional numbing (like being in a daze) and extreme distress. This may be confusing for others, but you need to understand that this is a normal reaction.
- ⇒ Actively offer support. The survivor needs to be able to talk to others and to make a factual reconstruction of what has happened. Don't be afraid to ask for details, but avoid sensation-seeking questions. The survivor also needs opportunities to express and share emotions. It is especially important that you show your willingness to listen to the survivor directly after the event.
- ⇒ Don't be afraid that you yourself will not be able to deal with the situation. There is no need to say or do anything special, or to use specific techniques. Just by letting the survivor know that you are willing to listen with an open attitude means that you are offering the support that he or she needs.

Some more do's and don'ts:

- don't emphasize the sunny side ("things could have been worse")
- don't minimize the event ("it's all part of the job"), don't be casual
- do be wary about making jokes, even though you mean well, and even if the survivor is joking around.
- don't say that you know exactly what the survivor has been through (because you can't know), but do express your sympathy
- don't over-dramatize; do respond on the same emotional level
- don't 'prescribe' emotions ("you must have been angry" or "you must be depressed"), but inquire whether the survivor has these feelings
- don't judge the emotions that may be hard to understand, such as guilt, shame or aggression
- do express your confidence and trust in the survivor ("I know that you will make it")
- don't give advice; don't 'preach'
- do let the survivor know that you will be available whenever he or she needs you

Final tip: Don't think that you have made a fatal mistake if you offended any one of the above do's and don'ts! Just by letting the survivor know you are concerned and willing to listen is one of the most beneficial aspects of the healing process.

### ***When to seek professional help***

Normally, the individual will experience less distress after a few weeks. The emotional reactions diminish, gradually becoming less frequent and less intense. However, there may be indications that the healing process is stagnating. Professional help should be considered in the following instances:

- ☞ there are signs of a psychological breakdown, such as psychotic reactions (confused or delusional thinking, hallucinations), prolonged and excessive lack of stability (crying fits, anxiety, disorientation) or marked changes in behavior
- ☞ the symptoms of flashbacks and hyperalertness are prominent after one month
- ☞ the individual indicates that he or she cannot cope with the emotions any longer
- ☞ the individual has persisting physical complaints such as sleep disturbances, loss of appetite, or headaches
- ☞ the individual isolates him/herself; refuses to talk about the traumatic event, even with intimate friends, or does not have anyone to talk to
- ☞ excessive use of alcohol; excessive smoking; use of drugs
- ☞ the individual is involved in another traumatic event
- ☞ there is a marked change in the individual's personality, e.g. he or she has become more aggressive or has become indifferent to taking risks.

In these instances, professional help is recommended. If the individual is still in the field, it may be necessary for him or her to leave the project. Don't let shame or guilt stop you from making the decision to seek professional help for the individual. Realize that a traumatic event is out of the ordinary. Professional help will assist the individual in completing the healing process.

You can call or email the PSC Unit directly. Telephone numbers and email addresses can be found in the annex to this booklet. The PSC Unit can assist in finding the required professional help. MSF Holland provides financial support to field workers in need of psychotherapy.

If you have any comments about these guidelines, or if you wish to share your own experiences, please let us hear from you!

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