

'I am passionate about caring for the carers'

We speak to Fiona Dunkley, author of *Psychosocial Support for Humanitarian Aid Workers: A Roadmap of Trauma and Critical Incident Care* (Routledge)

You dedicate the book to a friend who 'died giving her life to humanitarian aid work'.

Sadly, this friend became fatally ill due to the work she was committed to. Her story was definitely part of the motivation for writing this book. I often experience emergency first responders and humanitarian aid workers sacrificing their own self-care for the greater cause. I have supported thousands of individuals in recovery from trauma, burnout, and high levels of anxiety and stress – individuals that are strong, passionate, inspiring and resilient. I want to highlight this point as it challenges the corrosive effect of stigma so often hindering individuals from reaching out for the support they so desperately need.

You are a specialist trauma counsellor – what first brought you into this field of psychology?

I was attacked in my early twenties and suffered a fractured jawbone and concussion. My physical health recovered reasonably quickly, but my mental health recovery was a much more prolonged and painful journey. There were no specialist trauma therapists, at the time, and it took me a long time to recognise that I was suffering from post-traumatic stress disorder. I am passionate about caring for the carers of our world, and educating individuals and organisations in best practice trauma care. Today there are some very effective trauma treatments, including EMDR and TF-CBT. I share a detailed case study of each of these approaches in the book.

Do you see any difference in the psychological responses of aid workers in types of critical incident, for example between the aftermath of natural disasters and working in conflict zones?

There is a great deal of research to suggest that individuals recover better from a natural disaster than a man-made incident, such as a war zone, or terrorist attack. But it is important to note that each individual will be impacted in a different way. During the assessment we will explore the client's history of trauma, support structures, and other influences that may be impacting their mental health at the time of the traumatic event. All of these factors can have an impact on how an individual copes. The organisation I founded, FD Consultants, aims to show managers that an individual's symptoms are often based on their personal perception of the event. Also, how someone is supported immediately after an incident can have a fundamental impact on their recovery.

The causes of trauma can be more personal too, can't they? I'm thinking of the stories you tell in the book about kidnapping and violent assault of humanitarian aid workers.

I was moved by the number of aid workers that were willing to share their personal stories with me for the purpose of this book, and the encouragement from within the humanitarian sector. Individuals wanted to support the book as they felt it was much needed. There are some very moving accounts of individuals' experiences. I have taken care to conclude each of

these personal stories (including my own) in the final chapter of the book, 'the complete trauma grab bag', highlighting their personal recovery and experiences of post-traumatic growth.



Are aid workers generally better supported psychologically today than they were 10 or 20 years ago?

I would say yes to this, although there is still a great deal to be done to improve psychosocial services in the sector. Stigma and fear of career development still stand in the way of accessing services. There have been many high-profile cases of sexual exploitation recently in the media. This really is the tip of the iceberg, as I am aware of many cases that are waiting to be investigated, and, due to poor policies and procedures, survivors are not being supported efficiently. FD Consultants mainly support organisations after a crisis. We are trying hard to educate organisations to invest in preventative measures, such as training staff in trauma, stress and sexual violence awareness.

It is a natural human reaction to want to help others in distress. What advice would you give to someone travelling out to an incident or situation for the first time?

FD Consultants offer pre-deployment resilience consultations, which review resilient and risk factors and we can make recommendations to support individuals. Individuals need to be stress and trauma informed, they need to understand their own stress cycle, triggers and coping strategies. They need to hold healthy boundaries, and understand how easy it is to overstep these boundaries when we are faced with diversity and hardship. Individuals need to be aware of the impact of vicarious trauma. Attending a trauma and stress management program is the best way to gain the relevant knowledge, understand the risks, and build resilience.