Caring for Volunteers
A Psychosocial Support Toolkit

Frontpage: Haiti Red Cross
psychosocial volunteer Desulme Laforet, who was shot dead by gangsters in October 2011.
This toolkit is dedicated to him and all other volunteers with a humanitarian heart and mind.
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We would be happy to receive your comments, feedback and questions at psychosocial.centre@ifrc.org
Please see a full list of materials available from the Psychosocial Support Centre at www.ifrc.org/psychosocial

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“Put on your own oxygen mask first, before ...”

2011: Mass shooting in Norway, earthquakes in New Zealand, civil unrest in the Middle-East and a gigantic earthquake, tsunami and nuclear scare in Japan. All major disasters and dramatic events, where Red Cross and Red Crescent staff and volunteers were asked to provide psychosocial support to survivors and family members. Some National Societies were well prepared; others realized they were not. Occasions like these caused every society to reflect on how they could improve their preparedness.

Staff and volunteers across the globe provide important psychosocial support every day. Not only in response to disasters, armed conflicts and mass shootings, but also in social programmes for slum-dwellers, with elderly and isolated people, with people stigmatized because of illness and prejudice, with refugees and asylum-seekers.

Clear message
During the psychosocial support workshop at the IFRC General Assembly in Geneva in November 2011, a number of National Societies spoke about their experiences and work. The message was clear: We need to be much better in training and preparing our staff and volunteers for the important work of helping our beneficiaries – and to help ourselves and each other.

The role of volunteers in emergencies is increasingly complex. In the emergency environment, staff and volunteers are exposed to trauma, loss and devastation, injury and even death. They may find themselves comforting survivors in the initial phases of shock and grief, or providing survivors of violence with their first encounter with someone who can understand and give a human perspective to inhumane actions.

First aid not enough
Volunteers may work long hours in challenging emergency environments, often putting aside their own needs. At the end of the day, they often feel inadequate to help beneficiaries with the tragedy they are facing. Additionally, as members of affected communities, volunteers often work close to home and may experience the same losses and grief in their families and communities, as the beneficiaries they are supporting. Basic first aid training or being part of a disaster response team is not enough to prepare volunteers for these emotional experiences.

It is of course difficult to prepare for every type of event and to include every single volunteer. But it is possible to be prepared, both for supporting the wellbeing of staff and volunteers, as well as for the many other aspects of disaster response. A 2009 report with 19 participating National Societies showed that preparedness for psychosocial support to volunteers had often been developed AFTER a major disaster, but that most had wished they had had plans in place BEFORE. In other words – and as is said on planes every day, “Put on your own oxygen mask first, before you assist others.”

Small measures, big impact
This toolkit will help you do exactly that. Other materials available from the IFRC Reference Centre on Psychosocial Support (the PS Centre) mainly deal with assisting beneficiaries, whereas this toolkit has been written especially to help you assist volunteers – before, during and after a crisis.

Although the focus is on volunteers, ‘Caring for Volunteers’ will also provide useful tools for staff to use. Whether yours is a large or small society, whether you are often involved in emergencies or mainly work through social programmes, you can adapt the information in this toolkit to suit your own particular needs.

This toolkit supplements the main manual for ‘Volunteers in Emergencies,’ to be published by the IFRC in late 2012. It will help you tailor your guidelines for psychosocial support in ways that:

- are feasible for your National Society
- are adequate to the responsibilities and risks your volunteers may face, and
- make best use of your Society’s capacities and resources.

“It is only when you have been in a disaster that you will fully understand the need for psychosocial support, both for those affected and those who helped the affected.”

Frehiwot Worku, Secretary General of the Ethiopian Red Cross, who in her previous employment as a team leader with Ethiopian Airlines experienced the trauma of helping victims’ families following a plane crash.

“Volunteers, Stay Safe” a leaflet providing concise information about volunteers, published in early 2012 by the IFRC Secretariat, is also available to National Societies.

Remember, even small measures can have a big impact! We hope this toolkit will be useful to you in developing effective psychosocial support strategies for your volunteers and in sustaining their wellbeing and commitment in the important work that they do.
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They are available on the DVD and can be printed as handouts for field use.

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Caring for Volunteers

Resilience, Risk and Responsibility

Photo: Olivier Matthys/IFRC
In this section, we will look at some core concepts in relation to the psychological wellbeing of volunteers working in emergency settings:

1. Resilience – a person’s ability to cope in times of adversity
2. Risk – risks in the work that volunteers do
3. Responsibility – responsibility at different levels for volunteer wellbeing.

1.1 Understanding resilience

Resilience is a person’s ability to cope with challenges and difficulties, and to restore and maintain a new balance when the old one is challenged or destroyed. It is often described as the ability to ‘absorb shocks and bounce back.’

How each person responds to stress – whether they develop psychological problems or show resilience – is influenced by many factors, including the nature and severity of the crisis event, personality and personal history, and available support systems. Volunteers who are personally impacted by the crisis in which they are helping may have an additional vulnerability to stress, but they – as well as all volunteers – may benefit from training and support from peers and the organization.

The interacting social, psychological and biological factors that keep people resilient are called protective factors. They reduce the likelihood of severe psychological effects when encountering hardship or suffering. Belonging to a caring family or community, maintaining traditions and cultures, and having a strong religious belief or political ideology are all examples of protective factors. For volunteers working in emergency settings, other protective factors may include the motivation to help others, a good social support system, being able to leave work behind and take a rest, and the ability to give support to and receive support from team members.

For example, after the bomb and shootings in Norway in July 2011, the Red Cross encouraged volunteers to talk openly about their reactions and regular debriefings were organized. A special programme was implemented to train and assist staff and volunteers in local branches to provide support to affected young people and their relatives returning home after the tragedy.

Providing clear information about and easy access to available support is also essential. Knowing there is support available, if and when it is needed, provides a safety net to volunteers and emergency response teams, as they take on the difficult tasks of helping others in crisis.

1.2 Risks to volunteer wellbeing

In choosing to assist in difficult situations, volunteers may be exposed to destruction, death, stories of loss and grieving of survivors, and sometimes insecurity in the crisis environment. In addition, the traditional heroic role of RCRC staff and volunteers includes expectations that they are selfless, tireless, and somehow superhuman even in the face of overwhelming tragedy. The demands of the situation may far exceed their capacity to help, and at the end of the day they often feel they have not done enough.

But it is not the exposure to trauma or extreme circumstances that most often causes stress for volunteers. Those who act as helpers often find meaning in their work, and through this they are able to cope with the situations they are exposed to.

“A simple way of ‘seeing’ and acknowledging someone is that each day the team leader, programme manager or delegate greets everyone with a handshake, looking the volunteers in the eyes. This gives us an idea if we care for them, and they will go the extra mile for us. In Dadu I came in every morning before time to greet everyone by name with a handshake. I am sending them out to do something really challenging and I will be busy in the office all day, so they need to know I am with them in spirit.”

Ea Suzanna Akasha, team leader for PS volunteers in SWAT, Pakistan
to. Instead, volunteers (and staff) face a more frequent kind of stress that comes from working conditions and organizational issues. Let us look more closely at some of the main risks to the psychological wellbeing of volunteers:

- Exposure to traumatic events and stories
- Unrealistic expectations
- Heroic aspirations
- Working conditions
- Organizational issues.

**Exposure to traumatic events and stories**
Exposure to certain terrible things – such as graphic scenes of destruction, or injury or death of children – are particularly difficult for any responder. Volunteers may feel guilt at the death of someone they take care of, and must cope with their own fears about death and suffering as they assist others. Some volunteers may work in close proximity to the crisis event – on the ‘front lines’ of helping people very recently or severely affected.

Being a witness to traumatic events – or hearing stories of trauma and loss of survivors – can be very distressing for the volunteer. In addition, as volunteers often come from affected communities, the crisis may have impacted them and their families directly. They may have lost relatives or their property may be destroyed. Volunteers may have the same needs for assistance as the beneficiaries they are helping.

**Unrealistic expectations**
Volunteers are often poorly prepared for their own emotional reactions to the impact of their experiences, when providing care and relief to others. In their compassion for those who are suffering, volunteers may expect themselves to deny their own needs and work tirelessly. Their own situation and problems are pushed into the background. For example, they may feel it is not alright for them to go to their home for rest, when others have lost their homes, or to enjoy seeing their families when survivors have lost loved ones. Of course, these expectations are unrealistic and easily lead to high levels of stress. Volunteers’ own needs and reactions must be addressed at some point.

**Heroic aspirations**
In addition, some volunteers are motivated by the idea they can ‘save the world.’ When they are unable to meet the overwhelming needs of beneficiaries in crisis, they may feel inadequate. Some beneficiaries may also have unrealistic expectations of what the volunteer can do for them. Volunteers may be unprepared for facing the frustration and anger of beneficiaries who feel their needs are not being met.

**Working conditions**
Harsh working conditions related to the nature of the emergency can cause chronic stress for volunteers. They may perform physically difficult, exhausting and sometimes dangerous tasks, or be expected (or expect themselves) to work long hours in difficult circumstances. Volunteers may find themselves working in a prolonged crisis, and becoming increasingly detached from their own family and home life. If they become part of a collective crisis – such as a massive natural disaster – or if they face moral and ethical dilemmas, their stress is increased. They may feel inadequate to deal with the task, or overwhelmed by the needs of the people they are trying to help.

**Organizational issues**
Organizational issues have a very big impact on the stress and wellbeing of volunteers and staff. Stress can be caused by the following kinds of organizational issues:

- An unclear or non-existent job description or unclear role in the team
- Lack of information about the crisis. Poor preparation and briefing for the task
- Lack of boundaries between work and rest
- Inconsistent or inadequate supervision
- An atmosphere at the workplace where volunteer wellbeing is not valued and where their efforts are not being acknowledged and appreciated.

When stress from working conditions and organizational issues is not addressed, volunteer wellbeing and the quality of their work can be affected.

**Burnout**
Chronic work-related stress from all of these factors puts volunteers at special risk of burnout. Burnout is an emotional state due to long-term stress, characterized by chronic emotional exhaustion, depleted energy, impaired enthusiasm and motivation to work, diminished work efficiency, a diminished sense of personal accomplishment, and pessimism and cynicism.

A survey of the wellbeing of the volunteers who assisted after Cyclone Nargis in Myanmar in 2008 was conducted in cooperation with the Yangon University. It showed that almost one in 10 volunteers was feeling extremely depressed or burned out. One of the reasons was lack of appreciation. The Myanmar Red Cross took serious action...
and began organizing appreciation ceremonies for the volunteers, as well as encouraging hubs/branches to be more aware of the volunteers’ wellbeing and to support those who needed it. Among the initiatives was an international photo exhibition highlighting the work and stories of 25 of the volunteers.

Burnout implies that stress factors have taken over and that the person is so exhausted they are no longer able to distance themselves from their situation. They may forget about their own needs for rest and recreation, and eventually find that they have no more energy available, and thus nothing more to give in the form of support to others. Often the affected person is the last one to realize what is happening. For this reason, it is important for the whole team to understand the causes of stress and burnout and to be able to recognize the signs early on.

### 1.3 Being responsible for volunteer wellbeing

Volunteers work within the framework of National Societies as they help in emergency responses. That framework can be supportive and protective for volunteers, when everyone in the system understands the risks of the job and actively supports resilience and wellbeing. Thus, volunteer wellbeing is everyone’s responsibility – managers, staff and the volunteer themselves. However, each group has different responsibilities and we will elaborate on these later.

One way to increase the resilience of volunteers and response teams is to ensure everyone understands what they are likely to encounter in emergencies and how it can affect their psychological wellbeing. If a manager, for example, does not understand and value the importance of supporting staff and volunteers through the risks of the job, he or she may not create a supportive and reasonable working environment for the team. The system of support then breaks down, affecting the whole team. To avoid burnout, everyone involved in the work must be aware of and respect personal and practical limitations, and take responsibility to treat each other with respect. Everyone plays a role in keeping the team and themselves healthy and functioning well together.

At these key points, measures can be taken to reduce the likelihood that volunteers will develop stress-related problems. Equipped with information and support from the National Society, volunteers are then better able to:

- Manage their stress
- Work effectively in a team
- Seek help when they need it, and
- Sustain their own wellbeing through the demands of the job.

### WARNING SIGNS OF BURNOUT

Look out for warning signs that volunteers could be close to burnout:

- Physical symptoms, such as headaches or sleep difficulties
- Behaviour changes, such as risk-taking or drinking too much alcohol
- Relational problems, such as temper outbursts or withdrawing from colleagues
- Becoming less efficient at work or having difficulty concentrating
- Developing a negative attitude toward the job or organization, or toward beneficiaries themselves
- Emotional distress, such as continuous feelings of sadness.

"In the beginning, I felt sympathetic toward the traumatized children. Over time, it started to get to me; I felt exhausted and I cried every time thinking about it. This exhaustion affected my studies and friendships. My colleagues advised me to consult psychological support. Psychological support helped me to understand the situation I was in, and to deal with it in order not to affect my life."

Ahmad, 24 Year Old, Syrian Arab Red Crescent Volunteer.
Before the emergency response, the primary intervention consists of good, solid information about the tasks at hand, about stress and how to cope with emotional reactions to difficult situations. Such information prepares helpers to detect their own reactions and offers options for self-care and peer support.

During the emergency response, it is important to remember that the needs of volunteers and staff are often similar to the needs of those they are supporting. They too benefit from support that reduces the likelihood of developing stress-related problems. A supportive environment is one of the many crucial factors in minimizing stress.

After the response is over, volunteers need appraisal of their work and signs from others that they and their work have been valued. Reflecting together with a supervisor or peers after the response can help volunteers to understand and come to terms with their experiences.

In addition, it may take some time for volunteers and staff to process what they have seen and heard during the crisis – and what they were and were not able to do for others. It is helpful to follow-up with volunteers over time to assess their needs for support.

After the armed conflict in 2011, the Libyan Red Crescent recorded the experiences of some of the volunteers there. The National Society realized that it had not been well prepared to handle the reactions of young volunteers being sent into conflict areas as ambulance drivers or first aiders. The lessons learned have now formed the foundation of a new psychosocial programme in Libya, supported by a number of movement partners like the Danish and Italian Red Cross and the Palestine Red Crescent.

In prolonged crises or massive events, the personal situation for the volunteer may continue to be challenging. At times, volunteers and staff may show signs of serious stress reactions or other mental health problems. Each programme should have a referral mechanism for individuals in need of professional support.

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“In the field, sometimes disagreement among the psychosocial officers on what to do happened, usually because of the high tension of work. What we did to solve the problem was sit together, sharing what we felt and openly discussing. It usually worked.”

“After the armed conflict in 2011, the Libyan Red Crescent recorded the experiences of some of the volunteers there. The National Society realized that it had not been well prepared to handle the reactions of young volunteers being sent into conflict areas as ambulance drivers or first aiders. The lessons learned have now formed the foundation of a new psychosocial programme in Libya, supported by a number of movement partners like the Danish and Italian Red Cross and the Palestine Red Crescent.”

“‘It’s always very tiring, that stuff, because you’ve got people’s misery in your face all the time.’

Rosalind Miriam, Australian Red Cross, working in Brisbane after the floods in 2011.”
“When I volunteered in the PS programme, I was still a medical student. Immediately after qualifying, I worked as a doctor in a small outgoing health team in the devastated villages in Pakistan after the big floods in 2010. The most valuable thing I learned was the art of listening. Now I understand the power of listening and the importance of respecting others. When we respect others, we will get their respect in return. I also learned to accept the feelings in such tense and horrible moments. I am not coming from a village community, so many times the other staff members would help me understand the situations and communication of poor villagers. They helped me because I respected them. I am a better doctor now because of my time in the PS team.”

Zeeshan Solangi, volunteer for Pakistan Red Crescent.

MANAGERS AND VOLUNTEER RESILIENCE

Managers play an important role in creating a supportive team dynamic by showing concern for the wellbeing of individual volunteers and the team as a whole.

They can:

• Ensure reasonable working hours and conditions for volunteers
• Prepare job descriptions or make clear what is expected
• Prepare and train volunteers for their task in the field
• Check in with volunteers to see how they are coping during the emergency response
• Have regular team meetings during the emergency to check in with the team and offer support
• Encourage volunteer work to be carried out in pairs
• Set up peer support or buddy systems
• Offer information about stress and its impacts
• Encourage good coping strategies
• Support volunteers who have experienced especially difficult events
• Show appreciation and let volunteers know they are valued members of the team.
Communicating the Message

New Zealand. Photo: David Wethey
Communicating the message that psychosocial support is available and important for volunteers involves several strategies:

1. Making sure volunteers understand what psychosocial support is
2. Developing strategies to ensure psychosocial support happens
3. Informing volunteers about available support and how to access it.

2.1 Understanding psychosocial support

The term ‘psychosocial’ can mean different things to different people. Ways that volunteers understand the term can be influenced by their language, culture and customs; training they have had about psychosocial programmes or stress management; and their personal experience and history.

Some people understand the term to mean counseling or psychotherapy, while others may believe it is only for people who are mentally ill. Some volunteers – and even some staff or managers – may feel that psychosocial support is only for people who are weak or “can’t handle the stress of the work.” Biases and misconceptions still exist about psychosocial support, and need to be addressed so that everyone can come to a common understanding about its importance.

Stress management

It is essential that the management and staff of the National Society communicate the message to volunteers working in emergencies that their psychosocial health and wellbeing is a priority. This means that the management and staff also need to believe in the message they are sending. Line managers who are sensitized to the importance of volunteer support can best ensure psychosocial support strategies are implemented. It is also important that managers and staff understand their own work stresses, particularly in emergencies; how those stresses affect their well-being and behaviour toward others; and what support is available to them. If a manager is unable to see his or her own stress and its impacts – or doesn’t believe in psychosocial support – he or she may send a negative message to volunteers.

“I joined the Red Crescent, as I felt so sad on behalf of my suffering nation after the 2010 floods. I wanted to do something. I had no idea about psychosocial support and thought I would be handing out food parcels. Already on the second day I went with a psychosocial delegate to the destroyed villages. I saw her offering psychological first aid to a woman who had lost her older son in a traffic accident some years ago and had now lost a lot in the floods. Then I realized that food is not everything and psychosocial support is the basic need of all human beings. I learned a lot that I now use with family and friends. There are many problems in our society and psychosocial support helps in all sectors. As for me, as a volunteer, it refreshes the soul, and I feel relief when I share my own stories.”

Yazir Quazi, Pakistan Red Crescent volunteer.

“It was deemed that if staff and volunteers could not cope, then they should not engage themselves with such work. Their emotional needs were not discussed. Even some of the staff objected to receiving psychosocial support in the beginning, saying ‘I chose to become a paramedic, not a social worker.’ Now all that has changed.”

Chaim Rafalowski, disaster management coordinator, Magen David Adom
that would keep them from seeking support when they need it. Managers, staff and volunteers who have received training in psychosocial interventions in general (e.g. for beneficiaries) often better understand reactions to stress and are more sensitive to people’s need for support. They gain a clearer understanding of themselves – how they react and what helps them to cope. This understanding can be applied, not only to help themselves manage stress, but also to help their peers and beneficiaries.

It helps to keep the messages about psychosocial support positive and in terms that all volunteers can understand and accept.

2.2 Walk the talk – developing support strategies

There is no one way of developing a strategy for volunteer psychosocial support. Some National Societies have placed psychosocial support strategies within general volunteering policies or first aid policies. Others have created separate psychosocial support policies.

In developing strategies for psychosocial support of volunteers, begin by addressing the following three points:

• WHAT – what kind of support can we provide?
• WHO – who provides the support? Who is eligible to receive support?
• WHEN – how often and under what circumstances?

The policies and strategies at Federation level (box below) can provide a starting point.

What kind of support will your National Society provide?

You are probably already doing many things in the training and general care for volunteers that help in their psychosocial support as well. Many strategies are very low cost, and can be mainstreamed easily into the ways you currently prepare and manage volunteers during emergency response. You may find in this toolkit other strategies that would be relevant and useful to your situation, which may take some investment of staff or other resources. Whatever strategies you decide upon, the important thing is to be sure you include all the points of the response cycle – before, during and after – in order to be truly effective.

You are always welcome to contact the Psychosocial Centre (at psychosocial.centre@ifrc.org) or a health manager from one of the IFRC zones or regions for more information about what other National Societies do.

Federation resource

<table>
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<tr>
<th>Guideline or policy</th>
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<tr>
<td>“The International Federation and the National Societies shall provide psychological support as a long-term and reliable commitment to ensure that the psychological aspects of relief work are professionally implemented and make a crucial difference to the population, volunteers and staff affected by disaster.”</td>
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<tr>
<td>Volunteering in Emergencies (2007)</td>
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<tr>
<td>“National societies must ensure that there is a possibility for volunteers to receive adequate and systematic psychological support.”</td>
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<tr>
<td>Strategy 2020: Enabling action 1</td>
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<tr>
<td>“National societies are committed to improve quality standards, capacities and volunteer retention by creating a welcoming and socially inclusive environment. This environment means providing volunteers with training, supervision, regular evaluation and recognition, development opportunities that include designing and improving the work in which they are involved, insurance protection, equipment, psychosocial support and a supporting local structure relevant to the tasks that they carry out.”</td>
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Who will provide the support and who is eligible to receive it?

Supervisors and team leaders play an important role in preparing volunteers for their work, keeping an eye on their wellbeing, supporting and appreciating their efforts. But supervisors are not alone in this job. They also need to have the backup of senior managers, and the time and resources to support volunteers, in order to make this a priority. This includes giving supervisors basic training not only in supporting volunteers, but also in caring for their own psychological wellbeing.

“A situation like this calls for a lot of team work to eliminate any possibilities of error. Team work is a winner! While at any scene of a crisis or emergency, I work closely with my superiors and other volunteers. If it is time to carry survivors out of the debris, I take part. It does not make any sense if I leave work for others as I stand and look on. In Bukoto, my main role was first aid and I am confident I did it to the best of my knowledge.”

Nabaggala Phiona, volunteer for Uganda Red Cross.
Remember that volunteers themselves are a resource in the psychosocial support system. They have their own strategies for handling stress and ideas for what kind of support they would like and may be most helpful for themselves and their team. Peer support mechanisms can be put in place to provide a network of support, utilizing and building upon the resilience of volunteers and the emergency response team.

Another key point is determining who is eligible to receive support. According to Federation policies and strategies, all volunteers must be able to access adequate and systematic psychological support as a long-term and reliable commitment of the National Society.

Although not all volunteers will need the same level of support, they all should be able to access appropriate support when they need it. Some may get the benefit they need from regular team meetings, peer support or a generally supportive work environment. Others may require more regular supportive supervision or perhaps a referral to a professional. As you consider your resources, try to match psychosocial support strategies with the needs of your volunteers and the context in which they work.

When will support be provided?
Consider when and how often psychosocial support will be provided, and under what circumstances. Some types of support involve preparation and training of volunteers to understand their risks, available support and how they can best use their own coping resources.

Consider the feasibility and relative advantages of providing this ‘before-kind-of support,’ well before an emergency happens. If that is not possible in an acute emergency when new volunteers are joining to help, you may still be able to provide a psychosocial briefing and orientation and some written information.

Other types of support involve routine individual and team support measures during and after the emergency. The more these are mainstreamed into the organizational culture and way of working of teams and supervisors, the more likely they are to happen without much additional effort.

In certain circumstances, it may be useful to plan for additional psychosocial support for volunteers. For example, for volunteers working face to face with seriously distressed survivors, confronting death, or working long hours in a protracted crisis, it may be useful to have a mandatory regular team meeting, supportive supervision or end-of-response reflection meeting. It may also be useful to have a counselor or psychosocial support advisor sit in on such meetings to support the supervisor and give extra support to individuals or the team as needed.

Making some psychosocial support measures mandatory, rather than ‘on-demand,’ will make it easier for volunteers to seek support.

“It is very stressful work, but the Red Cross provides us with training and opportunities to debrief and support one another. For me, meeting my clients makes me feel relieved, especially the children, because I learn a lot from them and they make me laugh. It does happen sometimes that I meet very sick persons and then of course I do not feel fine. What I do is that when I get home, I sing and share my pain with my own children, and pray for them, and I will feel okay after that.”

Buyiseewe Flora Nkobu, South African Red Cross facilitator working with people affected by HIV and AIDS.

It is important to remember that not everyone will want or need professional-level support during or after working in an emergency. However, for those who do, try to have mechanisms in place to assess their need for referral and provide easy access for them to receive it. In some contexts, volunteers may be able to directly access confidential professional support, with information and resources provided by the National Society.

In Syria the volunteers who worked during the unrest were offered ‘defusing sessions’ every Friday afternoon. The sessions were for groups of volunteers and facilitated by a professional psychologist, who also offered individual counseling to those who needed it.

“Some children became to act negatively toward me. Sometimes, they would frown at me and refuse to interact with me. When I asked the psychologist, he told me the kids might be jealous because I am paying attention to some kid more than the others. The psychologists advised me to change the way I carry on the activities, and deal with this age group.”

Muhammad, 23 year old Syrian Arab Red Crescent volunteer.
“We have this booklet about coping with personal crisis and it is just brilliant. I always try and make sure I hand out as many of those as possible. It’s the sort of thing that can have a carry-on affect, long into the future. I say to people, ‘Please keep it somewhere where you keep bumping into it so that you can keep reading it.’ They’ll read it the first time and they’ll think, ‘Oh this is great,’ but then they’ll forget it five minutes later because their brain’s a bit mushy. But the more people read it, the more they can help themselves and help other people down the track. It’s that longer-term recovery stuff that’s so important.”

Rosalind Miriam, Australian Red Cross volunteer.

MESSAGES TO VOLUNTEERS

You may want to cover the following information in your messages:

- The importance of volunteer psychological wellbeing to your National Society
- Possible stressors of the job and stress reactions, and how you can cope with them
- Types of support available and clear direction on how to access it (procedures, contact details)
- Expectations of the volunteer in managing stress; attending activities for preparation, supervision and reflection; and working supportively in a team.

Consider giving the information at various points in time, so that the message gets repeated through the response cycle and serves as a reminder to volunteers.

Key points in time and places where you can communicate about stress and psychosocial support include:

- During the recruitment process
- Within policies, codes of conduct, and terms of reference they receive upon joining the National Society
- During training sessions
- During briefing and orientation for a specific emergency
- In ‘pocket information’ they can carry with them to the field (e.g. tool 11 page 40)
- During individual and team supervision meetings
- During reflection meetings at the end of the day or at the end of a mission
- During follow-up communication (written or verbal) after the emergency has ended.

“When some of the problems we face relate to cultural differences. Once, while providing support for a group of Iraqi mothers, I asked them, ‘Are you happy’ in Syrian dialect. The response was very negative. It turns out that the phrase for ‘Are you happy?’ in Syrian means ‘Were you beaten?’ in Iraqi dialect.”

Rasha, 27 year old Syrian Arab Red Crescent volunteer.

2.3 Informing volunteers

All of the psychosocial support messages, policies and strategies that you put in place are only worthwhile if volunteers know about and understand them! Consider the language(s) of your volunteers, their reading level and their culture and customs when providing information about psychosocial support. Try to keep messages clear and simple, and provide directions on the procedures for accessing support – including phone numbers or other contact details. Finally, it is helpful to prepare the messages before any emergencies happen.

Have information visible in different formats, such as posters, leaflets and pocket information, to raise awareness of psychosocial support for volunteers for everyone in the National Society.

Information about psychosocial support is best given by staff at different levels of the National Society (headquarters, managers, field team leaders). However, it is often helpful to designate someone to be responsible for informing volunteers of the importance of psychosocial support and the associated policies and procedures. Consider who is best placed to do that within your National Society. For example, this could be someone in human resources or staff involved in managing volunteers. Ensure that local branches designate someone to be responsible for the message.
“The leader is holding the psychological wellbeing of the group in his or her arms in a kind of emotional embrace. When a leader creates this kind of environment, it is easier for staff and volunteers to feel safe, to open up, to admit not knowing everything and to ask all the stupid questions. Remember, when one volunteer is posing a question, three others will have had the same thought. It will be easier to have fun and to relate. And it will be easier to share what is challenging or emotionally difficult. Volunteers and staff will come to us with issues that they need help in solving. They may need someone giving advice, may need to be listened to. I never had anybody coming with insignificant issues or asking for favours.”

Ea Suzanna Akasha, team leader for PS volunteers in SWAT, Pakistan.

“What has helped me the most in coping with the daily situation is the daily meetings we had with all the team members and the delegate. We were sharing our difficulties we were facing every day and how to solve them. Meeting every day and sharing with other volunteers has helped me a lot because I realized I was not alone facing difficulties. We were supporting each other. We had a strong team.”

Frants Dorilas, psychosocial support volunteer for Haiti Red Cross.
With information and support, individual volunteers and emergency response teams can function more effectively. No matter how simple or elaborate your psychosocial support for volunteers is, be sure it includes information and interventions at all three stages of the emergency response cycle: Before, during and after.

In this section we will cover:

1. Support strategies at each phase of the response cycle
2. How to match the needs of your volunteers with the type of work they do and the resources of your National Society
3. Basic and additional strategies which you can tailor to your organization
4. Peer support

3.1 Support strategies at each phase

The time before an emergency happens offers opportunities for preparation and planning, the time during a crisis is important for ongoing support, and the time after a crisis is important for recovery, reflection and improving future response.

Possible volunteer support activities at each phase are expanded in the sections below.

3.2 Matching resources and needs

In order to ensure you provide adequate psychosocial support for volunteers, take into consideration the differences in their exposure to risk. Some volunteers may assist with routine activities or help in response to a single, contained event, such as providing support to a family who has experienced a fire at their home. However, other responders may work in prolonged crisis settings or particularly severe situations. The following crisis situations may be particularly difficult for volunteers:

- Working long hours or for a prolonged time in an acute mass emergency, such as a large natural disaster
- Assisting in response to violent situations and armed conflicts
- Assisting in situations with human rights violations, such as ethnic violence
- Handling dead bodies, or witnessing or working with massive loss of life
- Working in situations with injury or death of children.

We never know when a major emergency may happen. As far as possible, consider contingency plans for particularly difficult emergency responses before they happen, and the extra measures that might be helpful to volunteers. In addition, having certain minimum psychosocial support measures in place for volunteers in a routine way ensures that they – and you – have a basis for sustaining their wellbeing, if and when they are called upon for difficult tasks (see worksheet D).

In some situations, it may be useful to consider extra or specific types of training or preparation for volunteers, more attention to monitoring their wellbeing and supporting them during the crisis response, or additional types of reflection and post-crisis support activities. This might be the case for example for very young volunteers who have less life experience. During a major music festival in Denmark nine young men among the audience suffocated due to overcrowding. Hundreds were injured in the mayhem that followed, and Red Cross volunteers managing a first-aid post were immediately called in to support. They were prepared to treat injuries but not for a deathly disaster nor for the chaos and confusion following the tragedy, where hundreds of festival-goers were in distress, searching for each other, trying to get information about what had happened to friends.

Danish Red Cross deployed professional assistance to help both those affected and the volunteers, and follow-up sessions were organized. However, some young volunteers developed severe psychological problems and needed to be referred to more long term treatment. “In this case it was clear that the youngest volunteers were those most affected by the accident and the aftermath”, says Nana Wiedemann, director of the PS Centre, who coordinated the psychosocial intervention and later organized the follow-up sessions for the volunteers.

After the tragedy – and the lessons learned – Danish Red Cross decided to improve its preparedness by training all first aid managers in PFA and to support free sessions with a psychologist to volunteers who needed it.

3.3 Basic and additional strategies

The sections below suggest psychosocial support strategies for each phase of the response cycle. They include basic strategies that are useful for all National Societies, and additional measures that you can put in place depending on your resources and situation.

Use the following worksheets to see what you currently have in place in terms of basic and additional measures, and what might be helpful to further develop in each phase – before, during and after a crisis.
and after. Think creatively about how to use your existing resources and structures to tailor support to your volunteers according to their tasks and needs. Remember that doing something is better than doing nothing. Even small things can have a big impact in creating a culture of support for volunteers in your National Society.

**BEFORE: Inform and prepare**

The 2009 report from the PS Centre about the psychosocial support in 19 National Societies showed that most societies wished they had had contingency plans for support to volunteers in place before big events happened. Strategies not only prepare and equip volunteers for risks they may face, but are also important in preparing the organization and line managers to be aware of psychosocial wellbeing of volunteers and know how best to support them.

Consider the procedures and strategies you currently have in place in your National Society for:

A. Recruiting and screening volunteers
B. Orienting volunteers to the organization and work
C. Briefing and training volunteers to help in emergencies
D. Developing contingency plans.

(see worksheets A-D)

In regards to recruiting and screening volunteers (see worksheet A), some volunteers have previous experience with facing traumatic events in their lives, and many may come from the affected community. Particularly in large-scale emergencies, it is likely that many volunteers will have been directly affected and participating in helping efforts can be therapeutic for them.

Assisting as volunteers can empower them, give meaning to their own experience, help them to feel part of a larger community, and to feel they are making a difference. However, it is also important to screen volunteers in the situation, as far as this is possible, to be sure they are up for the tasks of helping in emergencies. Although some National Societies have resources to screen spontaneous volunteers on the spot, in the immediate aftermath of a crisis when people are facing life and death situations, it may not be feasible for you to do this.

A week or so after the immediate crisis, when staff and volunteers are together and the organization is functioning in a more systematic way, then you will be better able to screen volunteers.

In the screening process, it is important to assess how the volunteers understand and have dealt with their previous experiences. They should have some emotional distance from difficult experiences and be aware that work in emergencies can also trigger feelings from the past. Screening may help to identify those volunteers who may become overwhelmed by working in a crisis setting (See tool 10 for sample questions you can use when screening potential volunteers).

Once volunteers have been selected, consider the importance of orientation, briefing and training (see worksheets B and C). For example, training equips both volunteers as well as other staff and managers in basic support techniques, such as psychological first aid and peer support. Psychological first aid is described in section 4 and peer support is outlined in more detail at the end of this chapter. Training line managers for volunteers is especially important to be sure they have the knowledge and tools to provide support when it is needed.

Another “before” measure to put in place is contingency plans within your National Society (see worksheet D). Developing contingency plans in advance can help National Societies to be prepared for particularly difficult or overwhelming emergency events. When plans are in place, ensure volunteers and managers know their roles and responsibilities regarding self and team care, and how to access additional support when needed. It is also essential that contingency plans are included in the budget, and that the procedure for releasing the funds is clear and simple. In this way, support can happen quickly to help volunteers in acute crisis situations.

**SUPPORT ACTIVITIES BEFORE, DURING AND AFTER AN EMERGENCY**

Consider the following support activities before, during and after an emergency:

### BEFORE

**INFORM & PREPARE**
- before a crisis happens or before the volunteer is sent to help.
  - Recruitment and selection
  - Orientation
  - Briefing and training
  - Contingency planning

### DURING

**MONITOR & SUPPORT**
- during active response to a single event or prolonged crisis.
  - Team meetings
  - Monitoring individual and team stress
  - Supervision and additional training
  - Peer support and referral

### AFTER

**REFLECT & REFER**
- after the crisis is over, or when the volunteers end their work.
  - Team and individual reflection
  - Appreciation of volunteers
  - Peer support and referral

**WORKSHEET A: RECRUITMENT AND SELECTION**

**Basic**

When recruiting and screening potential volunteers, do you currently:

- Discuss tasks they may perform in difficult situations?
- Emphasize the importance of their wellbeing?
- Ask about their resources and strategies to cope with stress?
- Routinely ask about their previous experience with crises or stressful events, how they coped and how they feel now about the event(s)?

**Additional**

Do you currently:

- Emphasize the shared responsibility of the volunteer and National Society in ensuring their wellbeing?
- Give information about available psychosocial support for volunteers?
- Have screening & recruiting guidelines and train staff in those guidelines?
- Screen volunteers using professional crisis responders or psychosocial personnel?
This is a unique situation. I have never worked in a situation like this before, where people have been moved because of a nuclear risk and don’t know when or if they will be able to return to their homes. Some people are angry and some people are not.

Japanese Red Cross psychologist Keiko after the triple disaster in March 2011

**WORKSHEET B: ORIENTATION**

**Basic**
When orienting volunteers to the organization and crisis work, do you currently:

- Provide information on the stresses of emergency work and how it may impact their wellbeing?
- Talk about good self- and team care strategies?
- Ask volunteers what kind of strategies they use and what support from their team members and supervisors would be most helpful to them?

**Additional**
Do you currently:

- Provide both verbal and written information about stress and coping in their orientation talk and materials?
- Provide verbal and written information about psychosocial support resources available to volunteers through the National Society, including contact details for referral sources?

**WORKSHEET C: BRIEFING AND TRAINING**

**Basic**
When briefing and training volunteers to respond to a specific emergency, do you currently:

- Include information about specific stresses relevant to the crisis situation (e.g., encountering death or serious injuries)?
- Emphasize the importance of self- and team care?
- Assess together the readiness of the volunteer for this mission?
- Explain how volunteers can access support from their supervisor or peers?
- Include psychological first aid (PFA) in first aid training for all staff and volunteers?
- Train all line managers and supervisors in individual and group PFA?
- Have crisis responders share their experience during training to normalize stress reactions, emphasize self-care and the importance of accepting support?

**Additional**
Do you currently:

- Explain how volunteers can access support from their supervisor or peer supporters?
- Emphasize the importance of attending individual and team meetings for support and supervision?
- Provide contact details and instructions for volunteers to access confidential psychosocial support (e.g., from a mental health professional)?
- Train all volunteers in recognizing symptoms of stress and basic self- and team-care?
- Ensure all managers have tools for individual and group crisis support?
- Train all managers in how and when to refer volunteers for professional psychological support?

**WORKSHEET D: CONTINGENCY PLANNING**

**Basic**
In planning for unexpected serious events, do you currently:

- Have a plan to support volunteers working in especially difficult circumstances (e.g., within the organization or by referral)?
- Know up-to-date referral resources and mechanisms in your area?
- Have a line within your annual budget for funds to cover psychosocial interventions for volunteers in difficult circumstances if they arise?
- Know who has the authority to release funds for interventions?

**Additional**
Do you currently:

- Have a referral system in place, where support is provided by semi-professional volunteers and supervised by professionals?
- Have a referral system in place for confidential, professional psychological support?
- Have a system in place to supervise and support line managers who provide support to volunteers?

**SIMPLE QUESTIONS ABOUT SOMEONE’S EMOTIONAL STATE**

Some simple questions to ask in order to get a sense of the emotional state of the volunteer are:

- “How is your current situation?”
- “Did you lose someone in the emergency?”
- “How are you feeling now about what happened to you/your family?”
- “How much time do you have available to help?”
- “In what ways do you think you can help and are there certain things you might find too difficult to do?”

Remember that if volunteers are in shock, they may still be able to do – and benefit themselves from – some simple routine tasks to assist.
“My house collapsed during the earthquake ... that night I found myself walking in the streets. I did not know what to do and where to go. After a few days I approached the psychosocial team of the Red Cross to become a volunteer. After the first day of the training, I already felt better. The trainer listened to me and I learnt that I could also listen to others. Before I was wondering what I could do ... how to restart something in my life. After the training, I had regained hope”.

Erline Francois, Haiti Red Cross volunteer.

“...I’d have to say it has been quite challenging. It’s a whole new experience for me. I became a member of the Red Cross volunteer group a couple of years ago, but this is my first emergency situation so I had to call on some of my old skills as a school teacher. I believe the people have handled it extremely well and I think that’s because they’ve felt supported. The RC teams that I’ve worked with have been phenomenal and I think also the important thing is that they’ve had local faces and that’s why I’ve stayed on board for as long as I have.”

Gail Hogg, who worked as a volunteer for Australian Red Cross after the 2011 floods in Victoria State.

**DURING: Monitor and support**

One of the most important support measures you can put in place as a manager during the emergency is to create a supportive and open atmosphere for volunteers, so they feel comfortable to ask for support when they need it. As a line manager or supervisor, be proactive in creating a culture of mutual team support by:

- Talking openly about stress and psychosocial support, so volunteers feel able to express their feelings and concerns without fearing consequences.
- Enhancing a sense of belonging and togetherness through regular team meetings.
- Making yourself available for supervision or private conversations with individual volunteers.
- Reaching out to volunteers that you feel may be in distress or in need of support.
- Respecting confidentiality to create a safe environment for volunteers to seek support.

Encourage volunteers to use good self-care strategies as part of their responsibility to wellbeing. There are many things volunteers can do – and already do – to take care of themselves while working in difficult situations. Being deliberate and active about their self-care not only helps volunteers withstand the rigours of emergency work, it also enables them to help beneficiaries more effectively. See tool 11 for self-care reminders that you can include in your messages to volunteers or use as a handout.

As a manager, give special attention to volunteers exposed to critical events in the line of duty. If you have support networks and referral resources in place, make sure they are prepared and ready to go. For example, mobilize volunteers and staff who are trained in psychological first aid and peer support to assist where appropriate. You may want to alert the referral resources you have – such as (semi-) professional support staff within or outside the agency – to be on standby, in case they are needed. Remember that managers and supervisors may also need extra support and supervision, as they assist volunteers who are directly impacted.

Consider the procedures and strategies you currently have in place in your National Society for:

- team meetings (E)
- monitoring individual and team stress (F)
- supervision and additional training (G)
- peer support and referral (H)

(see worksheets E-H)

When a staff member, volunteer or response team is impacted by a critical event, consider providing information and support not only to those affected, but also to others involved in the response. Friends and colleagues of those directly impacted may also need reassurance and appropriate information. Providing some facts about the situation will help to dispel rumours.
“After 10 years working in emergency relief, I felt myself beginning to respond too slowly to important situations that required quick decision-making. I felt like I was moving in slow motion. I remember wondering if this was what burnout felt like. I didn’t want to find out, so I actually put myself on a break. I had seen colleagues who had hit the wall and burned out, and it would take them a year or two to recover.”

Hortence

SELF-CARE REMINDERS FOR VOLUNTEERS

• If you feel overwhelmed by the situation or your duties, try focusing for a while on simple and routine tasks. Let peers and supervisors know how you feel and be patient with yourself.

• If you experience a critical event, talking with someone about your thoughts and feelings may help you to process and come to peace with any unpleasant experiences.

• Some reactions are normal and unavoidable when working in difficult circumstances.

• Take care of your own body and mind.

• Get enough rest and sleep.

• Limit your intake of alcohol and tobacco.

• If you have sleep difficulties or feel anxious, avoid caffeine especially before bedtime.

• Exercise to relieve tension.

• Eat healthy foods and keep regular meal times.

• Keep in touch with loved ones.

• Talk about your experiences and feelings (even those that seem frightening or strange) with colleagues or a trusted person.

• Listen to what others say about how the event has affected them and how they cope. They may share useful insights.

• Express your feelings through creative activities, like drawing, painting, writing or playing music.

• Play and take time for fun.

• Consciously try to relax by doing things you enjoy, meditation or yoga.

WORKSHEET E: TEAM MEETINGS

Basic
When conducting team meetings, do you currently:

☐ Brief volunteers at the beginning of each work day to prepare and encourage them?

☐ Debrief volunteers at the end of each day to ask what they experienced and how they are coping?

☐ Create a culture of support among team members and openness to seek help and support when needed?

Additional
Do you currently:

☐ Hold additional, routine team meetings during work in especially difficult circumstances?

☐ Hold special team meetings, if volunteers themselves are impacted by a critical event, to provide information, assess needs and offer additional support?

WORKSHEET F: MONITORING INDIVIDUAL AND TEAM STRESS

Basic
When monitoring individual and team stress, do you currently:

☐ Establish and ensure volunteers take work breaks and time away from the emergency to go home and rest?

☐ Check in with individual volunteers and teams to see how they’re coping and getting along together?

☐ Encourage good self and team care strategies?

Additional
Do you currently:

☐ Rotate volunteers who are performing particularly difficult tasks into less stressful work to give them breaks?

☐ Create a schedule of shifts for volunteers working long hours in a sustained emergency so that no one volunteer works too long?

☐ Provide individual and group PFA as needed?

☐ Establish routine meetings for all staff and volunteers working in particularly difficult settings to check in with a (semi-) professional psychosocial support person?
WORKSHEET G: SUPERVISION AND ADDITIONAL TRAINING

Basic
When supervising and training volunteers, do you currently:
- Make sure managers are accessible to volunteers who need supervision or support?
- Give volunteers opportunities for supervision at regular intervals during an emergency response?
- Supervise volunteers on-site during their fieldwork?

Additional
Do you currently:
- Ensure managers have access to supportive supervision by professionals?
- Provide additional training as needed for volunteers responding in especially difficult circumstances?
- Provide managers additional training as needed for supporting volunteers, including refresher training in PFA and peer support?

WORKSHEET H: PEER SUPPORT AND REFERRAL

Basic
When implementing peer and professional support for volunteers, do you currently:
- Encourage team members to look out for each other?
- Have volunteers work in pairs in difficult settings?
- Establish ‘buddy systems’ for mutual support among team members?
- Develop a referral system for volunteer support within the organization or with locally available counselors (including those from faith communities)?
- Share information with volunteers about how to access available, confidential support?

Additional
Do you currently:
- Develop and activate peer support networks?
- Provide supervision of peer supporters by trained staff or semi-professionals?
- Develop and keep up-to-date a roster of (semi-) professional psychosocial support resources for volunteers in need of referral?
- Provide timely, confidential referral to a professional for volunteers in need of extra support or those exposed to critical events?

"It was overwhelming. The media were everywhere, and we were surrounded by groups of armed police. The entire event was somehow isolated and encapsulated. I remember there were 10-12 hearses lined up. You are not really prepared for such situations . . . you turn on the autopilot and just focus on the job before you. We couldn’t change what had happened. However, I tried to prepare mentally based on what I had seen in the media, and I am glad I went. It would have been difficult to sit at home, and I am grateful that I could do something. Afterward we had excellent follow-up. None of us were allowed to leave before having talked to a psychologist and luckily I have not been struggling with any issues since."

Andreas Brosø, Norwegian Red Cross volunteers who assisted after the mass shooting at Utøya in July 2011.

AFTER: Reflect and refer

After witnessing and working in a crisis situation, volunteers should not expect they can go immediately back to ‘life as usual.’ Encourage them to take time to rest, re-connect with loved ones and move slowly back into usual routines if possible.

Many people will process the experience of living through or working in an emergency over time – reflecting on what they learned, moral or ethical dilemmas they encountered, and the human suffering they have seen. Assist volunteers in understanding and coming to terms with their emergency experiences by providing space and time for reflection.

In individual and team meetings, volunteers can share feelings, give and receive feedback about the work and their role, and be recognized and appreciated for the work they have done. Investing time to listen to volunteers honours their opinions and helps to keep them motivated and engaged to help in the future. This is also a time when the organization and volunteers can talk about lessons learned in the response and the support they received, so that improvements can be made in the future.

The process of recovery may be different for each volunteer, and there is no set time for how long recovery takes. In prolonged crisis situations, the personal situation of the volunteer may continue to be challenging. In addition, some may wrestle with the overwhelming demands they encountered and what they were and were not able to do to help others in terrible situations. Those exposed to particularly traumatic or difficult experiences may need additional support to recover and make peace with their experiences. Although professional help may not be available in every context, try to put in place referral resources for extra support when needed, including peer support, supervision and professional or semi-professional consultation.

Consider the procedures you currently have in place in your National Society for:

I. Team and individual reflection
J. Appreciation of volunteers
K. Peer support and referral after a crisis.

(see worksheet I-K)
WORKSHEET I: TEAM AND INDIVIDUAL REFLECTION

Basic
When helping volunteers reflect on their emergency experiences, do you currently:

- Bring team members together after the crisis has ended for reflection and appreciation of their work?
- Meet individually with volunteers after the crisis has ended to reflect and assess their need for additional support?
- Take the opportunity in individual or team meetings to give information about common feelings after crisis work, and how to deal with difficult emotions?

Additional
Do you currently:

- Arrange individual or team meetings with psychosocial support persons (within the organization or outside sources) to provide information on stress and coping?
- Have managers or other designated staff check in with volunteers by phone or in person 1 month after the crisis response to assess their well-being and need for additional support?
- Ask volunteers their feedback on psychosocial support offered to them before, during and after the crisis response in order to make improvements in the future?

WORKSHEET J: APPRECIATION OF VOLUNTEERS

Basic
To acknowledge the work of volunteers in the emergency, do you currently:

- Thank volunteers and acknowledge their work individually and in team meetings?
- Provide a token or letter of appreciation to volunteers?

Additional
Do you currently:

- Arrange formal and informal events, rituals or ceremonies to acknowledge and appreciate the work of volunteers, after the crisis has ended?
- Ensure some visibility e.g. in newsletters and magazines?

3.4 Peer support

Peer support is a very effective approach for helping volunteers cope with stressful situations, and makes good use of the resources within the organization and among volunteers themselves. As the name suggest, ‘peer support’ means offering assistance to someone at the same level as the supporter.

Peer support is an active process and requires peers to be engaged in supporting each other and creating the time and space to talk together about reactions, feelings and how to cope. The following are key elements of peer support:

- Concern, empathy, respect and trust
- Effective listening and communication
- Clear roles
- Team work, cooperation and problem-solving
- Discussion of work experience.

Peer support usually can happen quickly, once peer support systems are in place. Often peer support is enough to prevent volunteers under stress from developing other problems. They learn from each other about ways of coping, and also further develop their own coping skills by helping each other. Peer supporters share experiences and provide each other short-term assistance, but they are NOT counselors and the aim of peer support is not to replace professional help. Professional psychosocial support staff can play a role in training and supervising peer supporters, and helping them to troubleshoot and refer peers who may need additional professional support. When using outside referral, make sure they have a deep knowledge and understanding of the National Society and the work that volunteers do.

There are many ways to provide peer support. Informal peer support includes ‘buddy systems’, where two volunteers or a volunteer and staff member are paired together to watch out for and support each other. They may work side by side in the field, enhancing safety and checking in with each other through the day to see how the other person is coping. The buddy can suggest that the volunteer takes a break, if he/she sees signs of stress emerging, or even recommend that the other stops working if the stress is serious. A ‘buddy’ can also be available after the emergency is over to reflect together about the experience.

Even professionals use the ‘buddy’ system. In Japan after the earthquake, tsunami and nuclear disaster, two very experienced psychology professors were asked how they managed to deal with the situation. Professor Kazuki Saito answered: “It is very important that the two of us always work together, we couldn’t do it on our own. This is called the ‘buddy system’. It may also be useful to pair experienced staff or volunteers with those who have less experience, particularly if it is the volunteer’s first time working in a crisis setting. The experienced person can serve as a resource for the new volunteer with practical tips for coping, safety and support, and the ins and outs of volunteer work with the National Society.”
“I was working as a psychosocial volunteer after the floods in 2010 and 2011 in Pakistan. Often I would be facilitating games with big groups of children. Some days there would be up to 70 children engaged in play activities. One day there was a child of around nine years of age. He was disabled with polio and he wanted so much to be in the ball game, but he could only stand and not run. So he participated the best he could. When we were leaving, he begged me to give him a ball. I felt so bad inside, because I myself love to play cricket, and I felt his pain and his needs. I knew how intensely he wanted to be part of the group. It was against the rules to hand over toys, but I called my programme manager and told him of my feelings and he gave me permission to bend the rules for once. I still think I did the right thing and I am glad my programme manager understood me.”

Shakeel Birmani, Pakistan Red Crescent Society.

WORKSHEET K: PEER SUPPORT AND REFERRAL AFTER A CRISIS EVENT

Basic
To continue supporting volunteers after the crisis, do you currently:
- Encourage team members to continue to be in touch with each other for peer support following the crisis response.
- Refer volunteers for additional support as needed and possible within the organization (e.g., by peer supporters or staff trained in psychosocial support)?

Additional
Do you currently:
- Offer peer supporters supervision by (semi-) professionals?
- Refer volunteers for confidential, professional psychological support through referral networks within or outside of the organization?

STRATEGIES FOR FORMALIZING PEER SUPPORT

To formalize peer support within your National Society, consider the following strategies:

- Provide training in how to be an effective peer supporter, including training in communication skills, psychological first aid and how to recognize and refer peers who need additional help.
- Provide regular supervision for peer supporters with a (semi-) professional.
- Organize willing volunteers into a peer support team to reach out to other volunteers, particularly new recruits. This team can connect with peers at the different phases – before, during and after the emergency – to raise awareness of available support and provide assistance.
- Organize peer support groups, led by experienced and trained volunteer peer supporters or by a (semi-) professional. Meeting in groups can decrease any fear or stigma about expressing emotions and seeking help.
## Tips for Peer Supporters

Working in stressful situations, all members of the team need to be supportive of each other. The following tips can help all volunteers to offer peer support in the best way – you may want to use the list as part of your messages or distribute it as a handout:

### Tips for Peer Supporters

<table>
<thead>
<tr>
<th>No.</th>
<th>Tip</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td><strong>Be available</strong> If you are asked to provide support, try to be available. Although not everyone will want to talk, people who have been through a stressful experience usually appreciate knowing someone is there for them. Be available without being intrusive.</td>
</tr>
<tr>
<td>2.</td>
<td><strong>Manage the situation and locate resources</strong> If needed, help to make sure the person is safe, protected, has some privacy and has access to the help they need, e.g., a doctor if they are injured.</td>
</tr>
<tr>
<td>3.</td>
<td><strong>Provide information</strong> Provide the person with accurate information, if you have it, in order to help them put their situation in a more objective and manageable perspective.</td>
</tr>
<tr>
<td>4.</td>
<td><strong>Assist a person to establish personal control</strong> Respect the person’s ability to make decisions and manage the situation. Listen and support them as an equal colleague in making decisions. Allow them to express feelings without judgment.</td>
</tr>
<tr>
<td>5.</td>
<td><strong>Give encouragement</strong> Some people feel guilty, blame themselves or lose a sense of self-esteem during stressful situations. Encourage the person to have a more positive view, by offering objective, alternative explanations and thoughts.</td>
</tr>
<tr>
<td>6.</td>
<td><strong>Maintain confidentiality</strong> Confidentiality is a cornerstone of all peer support. It is essential to the integrity of the entire process. Do not share your colleague's story with others or provide details about them to others. If other concerned volunteers ask questions, suggest they speak directly to the person.</td>
</tr>
<tr>
<td>7.</td>
<td><strong>Provide follow-up</strong> Sometimes it may be appropriate to provide some follow-up for the person you are helping, by giving them a call or checking with them in person. Be low-key and non-intrusive when providing follow-up, but do keep any promises you make to be in touch.</td>
</tr>
</tbody>
</table>
Psychological first aid (PFA) is a cornerstone of the support offered by the Red Cross and Red Crescent movement to survivors of emergencies and people affected by conflicts. In this chapter we will explore how PFA can also be used by staff and volunteers to support each other.

The types of distressing events that staff and volunteers may encounter include the following:

• Witnessing death, serious injury or destruction
• Hearing traumatic stories from survivors of emergencies
• Being themselves injured in the line of duty
• Encountering anger, threats or actual violence
• Hearing stories about abuse or witnessing injury of children
• They or their family being directly impacted by the emergency.

Remember that volunteers who work in a protracted crisis situation may be repeatedly exposed to distressing stories and events, or may suffer from chronic stress.

Each person responds differently to very distressing events, depending on their personal resources to cope, how they perceive what has happened and the support they receive from others. When volunteers experience a very distressing event, some may feel overwhelmed, vulnerable, anxious, uncertain or confused. They may experience sudden emotional upset, grief, anger or a sense of a hopelessness, or even feel apathetic and numb.

Volunteers who are in shock or crisis may have difficulties thinking clearly and knowing what to do, to cope with the situation and how to help themselves. Their sense of time may be disturbed, and they may feel very vulnerable or misunderstand what is being said and done. Others may cope relatively well with a distressing event in the moment, but have thoughts and feelings about it later on.

In this section we will cover:

1. What is PFA?
2. Offering PFA: Supportive communication and practical help
3. Ethical behaviour
4. When and how to refer a volunteer who needs extra support.

4.1 What is PFA?

PFA is caring support, offered to volunteers who have experienced a very distressing event or situation. It involves showing them warmth and empathy and listening to them. It also involves making the surroundings safe for them and helping them to deal with practical needs and problems. With this support, the volunteer can get stronger and regain the capacity to think and take care of themselves and others.

The following is a step-by-step guide for providing PFA to volunteers. This can be used as a handout for volunteers to take into the field (see tool 21):

- Make contact with the volunteer as their supervisor or peer supporter.
- If possible and necessary, remove the volunteer from the stressful situation to a safe place and limit their exposure to distressing sights, sounds or smells.
- Protect the volunteer from bystanders, other curious staff or volunteers, and the media.
- Make sure the volunteer is warm enough and offer a blanket if needed.
- Provide the volunteer with adequate food and fluids, but avoid alcohol.
- If you need to leave the volunteer, make sure someone else stays with them.
- Ask if the volunteer is tired and needs a place to rest and/or a place to go.
- Ask the volunteer what has happened and listen to their experiences, concerns and feelings. If they do not wish to talk, stay with them.
- Reassure them that their reaction is to be expected, given what they have just experienced.
- Ask the volunteer if they have someone to look after them or someone to talk to at home. Help them connect with loved ones.
- Provide factual information about where and how they can get specific services or resources.

“A six-year old Iraqi girl drew red and black circles over and over again. We asked her what she was drawing. ‘I am drawing my brother,’ she answered. It turned out that the girl had seen her brother blown to pieces, and she was drawing him as she saw him for the last time. Listening to this girl’s trauma made my heart feel heavy and gradually depressed me. Although for me, it is just a story, but for her, it is a part of her life.”

Bisher, 25 year old Syrian Arab Red Cross volunteer.

“The Christchurch search and rescue group often didn’t have power and water when they went home at the end of the day. They were balancing their own personal response to what had happened to their city, in addition to volunteering every day and some of those guys were really impacted,” says Kristen Proud from Australian Red Cross who was sent to New Zealand after the earthquake in Christchurch to help set up a psychosocial support programme and also assist the Red Cross staff and volunteers. She explains that individuals are naturally going to have a big emotional response to a large event like a natural disaster or an earthquake. “Every single individual who is involved is impacted and that ricochets and goes home with them. It impacts on their family; it impacts on their friends. I think incorporating psychosocial support immediately, as New Zealand Red Cross were able to identify, was really helpful for them and assisted in ensuring that their staff will recover from this.”

Kristen Proud from Australian Red Cross
4.2 Supportive communication and practical help

Offering PFA effectively involves supportive communication, as well as general care and practical help. Although we communicate and interact with each other every day, ‘supportive communication’ is a skill that requires special awareness of one’s words and body language and one’s attitude and attention to the volunteer in distress. This includes showing empathy, care and concern; listening attentively and without judgment; and keeping confidentiality.

Convey that you are listening attentively not only with your words, but also your body language. Non-verbal communication includes gestures, movements, facial expressions and sounds, such as sighs or gasps. Each culture has its own particular ways of behaving appropriately, but generally the following are important to keep in mind:

- **Turn toward or face the volunteer when they are speaking.**
- **Display an open posture by keeping your arms uncrossed.**
- **Keep an appropriate distance so you show interest without appearing too intimate or pushy.**
- **Avoid distracting gestures or movements.**
- **Make appropriate eye contact.**
- **Appear calm and relaxed.**

**FOUR KEY ELEMENTS OF PFA**

Keep these four key elements in mind when offering PFA to volunteers:

1. Stay close
2. Listen attentively
3. Accept feelings
4. Provide general care and practical help.

**1. Stay close**

A person in crisis temporarily loses his or her basic sense of security and trust in the world. The world may suddenly seem dangerous, chaotic or unsafe, and volunteers may even lose their belief in the goodness of human kind. Supervisors or peer supporters can help the volunteer to regain a sense of safety and trust by staying close and remaining calm, even if the volunteer is very anxious or emotional. Be prepared that some volunteers may express violent outbursts of emotions, such as shouting or rejecting help. Maintain contact calmly or stay nearby, in case they need help or would like to talk about what has happened.

Above all, be genuine, real and honest in order to help the affected volunteer to rebuild a sense of trust and safety. Be yourself and show your natural warmth and caring for the volunteer in distress.

**2. Listen attentively**

Take time to listen carefully to the volunteer’s story. Telling their story often helps volunteers to understand and come to terms with what they have experienced. Let volunteers know you are listening by giving them your sincere attention. If you are supporting a volunteer at the scene of an accident, listen and talk with him/her calmly until other help arrives.

Be sure to follow the wishes of the volunteer and don’t take over too much responsibility. Rather, support them to regain control of their own situation, consider their options and take their own decisions. Although the volunteer who has been through a distressing event may feel confused or vulnerable in that moment, they are still a person with skills and resources of their own. Encourage their ability to help themselves and empower them to feel resilient and resourceful. Keep a practical focus and help volunteers begin meeting their own needs.

**3. Accept feelings**

Keep an open mind to what the volunteer is saying and accept their feelings and interpretation of events. Don’t try to correct the facts or judge their perceptions of how things happened. Having empathy and respect for the person will help you to accept their feelings. Empathy is the ability to see and feel from the other person’s point of view, and to display personal warmth. No matter what reactions the affected volunteer may be having, demonstrate a sincere, positive regard for the welfare and worthiness of the affected volunteer.

**4. Provide general care and practical help**

When volunteers have experienced a crisis situation or are in shock, it is a great help if someone lends a hand with practical things. This can include contacting someone who can be with the volunteer, arranging for children to be picked up from school, driving the volunteer home, or helping the volunteer to get medical care or other support as needed.
4.3 Ethical behaviour

When offering PFA to a volunteer who is in distress, adhere to standards of ethical behaviour. Remember the codes of conduct for Red Cross and Red Crescent staff and volunteers. Any staff member or peer supporter offering PFA should be trustworthy and follow through on things they promise. Never take advantage of the relationship with the affected volunteer. Respect their right to take their own decisions, and be sensitive to their questions and needs.

Confidentiality is an essential part of ethical behaviour in offering PFA. Keep private what an affected volunteer shares about their feelings and experiences, and the details of their situation. Maintaining confidentiality assures all staff and volunteers that their privacy will be respected, if and when they may need support (see tool 23).

4.4 When and how to refer a volunteer

Most volunteers will recover well over time from a distressing situation with help from those around them and basic support. However, some volunteers may have serious distress reactions or their distress may last for a long time after the event has passed. Distressed volunteers will probably need referral for more specialized care if:

- They are so severely distressed that they are unable to function or take decisions for their life
- They might harm themselves
- They are a danger to anyone else.

Make sure that volunteers who are seriously distressed are not left alone. Try to keep them safe until the reaction passes or until you can get help from managers or professionals.

Each National Society should have a referral mechanism for volunteers in need of professional support. If you do not have sufficient resources, it might be possible to set up agreements with local health care facilities or local NGOs.

Two examples from around the world (next page):

“Essential to this recovery process is finding support, whether that is through friends, family or just someone to talk to. The Christchurch Red Cross staff and volunteers were amazingly supportive of each other and very connected. They would know if someone wasn’t OK and bring them in to me. They had a family atmosphere and I felt part of that spirit.”

Kristen Proud, Australian Red Cross psychosocial worker in New Zealand after the earthquake.

“I lost my cousin to the tsunami. He was very close to me. He was my best friend. I never understood how he could lose his life at a very young age. I was very angry at everything. I used to have bursts of anger at my family and friends. One day a foreigner came to our school. He spoke about our emotions and how we feel about the tsunami and the destruction many of us have witnessed. I began to understand as to what happened; also I came into acceptance of the events that have come to pass. I am good in drawing. This person from the Red Cross made us to draw about the things we feel on the school walls. This was a good exercise for me to share my emotions. These exercises helped me to tackle my anger and be a better person. Later on I went to our local Red Cross branch in Galle and I joined as a volunteer. It’s a fulfilling feeling to help others, especially my community. I volunteer specially at programmes which are held in schools in order to help other kids just like me who need to understand and cope with the destruction that happened.”

Saman Chandrasiri, volunteer for Sri Lanka Red Cross.
BELGIUM

The Belgian Red Cross offers training in psychological first aid to its volunteers. The training course is called “Schokdemper” or “shock absorber”. The course (which is open to all) teaches the volunteers how to react to critical incidents, how to care for victims and how to care for themselves. A shorter version of this training has also been introduced to Medical Intervention Service personnel. A short session on the psychosocial impact of critical incidents is also part of the basic training.

Everybody can access the services of the Red Cross Social Intervention Service following an event. Interventions can be organized, on request, for groups or individuals. A group of trained Social Intervention Service volunteers conduct both group interventions and individual conversations. After two to three sessions, the volunteers know whether a person needs to be referred to external sources of support. For groups, both defusing sessions and reflection meetings are organized. The aim is to regain trust within the group.

All volunteers and staff are eligible for support. Information about the service is provided during trainings and in internal publications. When there is a need, the Social Intervention Service intervenes directly. In 2009, following a dramatic knife attack on a children’s nursery, text messaging was used to reach all responders on the day following the event, offering the opportunity to call in, if anyone needed to talk. More than 90 per cent of the responders mentioned the message later on and felt it was supportive. People were also called directly, but this took a little longer.

When providing psychosocial support to volunteers and staff, an important question to ask is: “Are you worried about a colleague?” This is because responders tend to forget about themselves. Asking this question helps to identify people who do not initially want to talk themselves. They then receive a non-intrusive call with an offer to talk.

Psychological defusion and reflection meetings aim to help pre-existing groups functional again. These kinds of meetings are not always used, but they are one possible intervention amongst others. They allow the group to get the whole picture of the event, clarify misunderstandings, regain trust, normalize reactions, identify lessons learned and spot persons affected who need more support. For groups of staff and volunteers who were less directly affected by the crisis event, group meetings are offered.

Paul first found himself not coping at home a few days after the disaster. The second time, it took him by surprise. “We were all getting very tired,” he remembers. “You try to go home and you’ve got aftershocks happening all the time, it’s not normal. I was put in charge of one site and I got down there and I was all ready to go. I had my kit and I was going to get changed in the van and then: I forgot my boots. I forgot my safety boots. It was just a little thing. It completely threw me and I had a meltdown, panic attack. I got back to base and told them, ‘I can’t be here I’ve got to get out of here’. I made my way back to the Red Cross base and talked to Kristen, which was really helpful. It was really nice to know that there was help there if you needed it.”

Paul Davenport, who volunteered after the earthquakes in Christchurch, New Zealand.

COLOMBIA

The Colombian Red Cross psychosocial programme targets both Red Cross volunteers and paid staff. It provides psychosocial support in emergencies and disasters, and in programme areas, such as HIV/AIDS, domestic violence, internally displaced people and volunteer care. All branches of the Colombian Red Cross Society must have a team or a person who knows and works with the programme, and who belongs to the psychosocial network. Each branch also has psychosocial support groups for volunteers and staff that develop activities.

The psychosocial programme includes ‘Mental Health to Red Cross.’ Within the programme, there are three levels of training. The first level is very basic, and focuses on introduction and orientation, identifying risk factors related to mental health, referral to professionals and awareness-raising campaigns. The second level focuses on community-based counseling, psychosocial workshops and psychological first aid; the third level is about professional support.

Volunteers are made aware of the support available through the psychosocial support groups, who give information about the programme. Volunteers who need more specialized support are referred to professionals.

Some research on psychosocial support to volunteers has been done in the branches, and there was also a mental health study in 2008. The Colombian Red Cross Society has also built instruments to measure risk factors and protective factors in mental health.

The Colombian Red Cross Society has a psychosocial toolkit with a selection of material and readings. The National Society also has guidelines, regulations and policies that focus on psychosocial support.

Psycho-social support to volunteers is formalized in the psychosocial support policy of the National Society. Here, two target groups are defined: persons affected by emergencies, disasters or violence or living in vulnerable conditions, and volunteers and staff involved in humanitarian interventions. It further states that the psychosocial support should be tailored to fit the needs of the people involved, and that it should support them during the adaptation to new situations and strengthen their coping skills and recovery. In the policy, the National Society commits itself to recognizing the role and value of volunteers, to providing volunteers psychosocial support, as well as the opportunity to be trained and guided by psychosocial support professionals.
DO’S AND DON’TS IN SUPPORTIVE COMMUNICATION

The following table provides a recap of what to say and do, and what not to say and do in communicating in a supportive way with volunteers in distress, and maintaining ethical behaviour:

<table>
<thead>
<tr>
<th>What to say and do</th>
<th>What not to say and do</th>
</tr>
</thead>
<tbody>
<tr>
<td>Remember a person in crisis temporarily loses their basic sense of trust and security in the world. Stay close to the volunteer to help them feel more safe and secure.</td>
<td>Don’t ask the volunteer to recount all the details of any traumatic experience they have had.</td>
</tr>
<tr>
<td>Stay calm, even if the volunteer you are helping is very emotional.</td>
<td>Don’t give your opinions of the volunteer’s situation.</td>
</tr>
<tr>
<td>Be prepared that volunteers may express strong emotions, such as angry outbursts, when they are in acute distress.</td>
<td>Don’t tell the volunteer your troubles or share someone else’s story.</td>
</tr>
<tr>
<td>Listen attentively and carefully so you fully understand the volunteer’s story and what their concerns are.</td>
<td>Don’t tell the volunteer’s story to others. Keep what they tell you confidential, unless it is necessary to keep them or someone else safe.</td>
</tr>
<tr>
<td>Acknowledge their grief, tears, sense of loss or other feelings they may share.</td>
<td>Don’t correct facts about what happened or perceptions of the sequence of events.</td>
</tr>
<tr>
<td>Be comfortable with silence. Be willing to sit quietly with the volunteer if they wish.</td>
<td>Don’t touch the volunteer, unless you know it is acceptable to them.</td>
</tr>
<tr>
<td>Ask questions as necessary to clarify the volunteer’s experience and what they need.</td>
<td></td>
</tr>
<tr>
<td>Make eye contact, as appropriate, and keep your body relaxed and in an open posture.</td>
<td></td>
</tr>
<tr>
<td>Accept the volunteer’s feelings and their interpretation of what has happened without judgment.</td>
<td></td>
</tr>
<tr>
<td>If the volunteer refuses help, let them know that they can still receive help in the future if they want it.</td>
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</tbody>
</table>

Monitoring and Evaluation of Volunteer Support
Since volunteer support is the responsibility of the National Society, monitoring and evaluation (M&E) helps you to know if the support is working well, and perceived as helpful by volunteers.

In this section, we will cover how to set up your M&E system for volunteer psychosocial support, what information is relevant for you to know e.g., useful indicators, and how to check on the support provided during small and large events. As new situations arise for your National Society over time, M&E also helps you to know how to adjust your support to meet changing needs of volunteers in emergencies.

Why do we monitor and evaluate?

- **Accountability** – ensuring we’re accountable not only to donors and beneficiaries, but also to our staff and volunteers
- **Relevance** – ensuring support we provide is useful for volunteers
- **Efficiency** – ensuring volunteer support is timely and at reasonable cost
- **Effectiveness and Impact** – ensuring support has the desired effect for volunteer wellbeing
- **Sustainability** – ensuring benefits of support continue, even after the current emergency.

In this section, we will cover:

1. Setting up the system
2. Developing indicators and ways to measure them
3. Monitoring through different events
4. Evaluating and learning

### 5.1 Setting up the system

The kind of information you may want to collect relates to the following three questions:

- What is in place?
- How are people using it?
- How well is it working?

#### What is in place?

This includes not only the support activities you implement as a National Society (like training and orientation), but also the knowledge, skills and practices of volunteers. Everyone has ways of coping and handling stress in their life. Volunteers bring knowledge and skills to their work and some may even bring psychosocial or other relevant expertise to the ways they cope and support their peers.

#### How are people using it?

How people make use of what’s in place depends upon their knowing it exists (e.g., that there is information or support available) and how accessible it is to them. There may be strategies or protocols that look good on paper, but may not be effective simply because they are not being utilized.

#### How well is it working?

Critical reflection on the effectiveness of volunteer support helps you to know how to adjust existing support, add new methods and maybe abandon ones that are not effective – both in terms of impact on volunteer wellbeing and cost-versus-benefit.

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“I lost many friends in the earthquake. At the beginning I could not cope. I cried for several days. I even thought that it would have been easier if I had also died during the earthquake. I wanted to help but I couldn’t find the strength and the courage. I was feeling guilty. Then I joined the psychosocial team of the Red Cross. It has been the most important experience of my life. I have done what I had never done before. I grew up personally through this programme.”

Mickelange LeBlanc, Haiti Red Cross volunteer.

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How can you collect the information you need for setting up your system? The following approaches will help you know what volunteers need and what resources are already available:

1. Talk to your volunteers, staff and managers (e.g., in focus groups, interviews) about their understanding and perceptions of volunteer stress and the available support.
2. Conduct an anonymous survey for volunteers, staff and managers to assess their knowledge about volunteer stress and coping (see a sample survey below). Make an inventory of your current resources – human, material and financial – and find out how effectively those resources are currently being used.

From the information you gather from these different sources, you will have a clearer picture of what is in place to build upon, and what you may need to develop to fill in any gaps.
SET-UP QUESTIONS FOR M&E

The following table offers some questions to consider related to “what’s in place,” “how it is used” and “how well it’s working” across some specific domains. These questions can be used for setting up or evaluating your current system, and for monitoring over time.

<table>
<thead>
<tr>
<th>Domain</th>
<th>Needs &amp; Resources</th>
</tr>
</thead>
<tbody>
<tr>
<td>Knowledge &amp; skills</td>
<td>• What do volunteers already do to care for themselves and team members?</td>
</tr>
<tr>
<td></td>
<td>• What do staff and volunteers know about individual and team stress, and how to</td>
</tr>
<tr>
<td></td>
<td>manage it?</td>
</tr>
<tr>
<td></td>
<td>• How many volunteers and staff are already trained in peer support, psychological</td>
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<tr>
<td></td>
<td>first aid or stress management?</td>
</tr>
<tr>
<td></td>
<td>• How do managers understand volunteer stress?</td>
</tr>
<tr>
<td>Understanding</td>
<td>• How well do volunteers currently feel supported by the organization?</td>
</tr>
<tr>
<td>wellbeing</td>
<td>• What kinds of existing support do volunteers find helpful?</td>
</tr>
<tr>
<td></td>
<td>• What kinds of support do volunteers feel they need?</td>
</tr>
<tr>
<td></td>
<td>• What are the main stresses volunteers feel they are facing, e.g., heavy</td>
</tr>
<tr>
<td></td>
<td>workload, not understanding their role, confronting trauma in the field?</td>
</tr>
<tr>
<td></td>
<td>• How well do staff and volunteers feel their teams function together?</td>
</tr>
<tr>
<td></td>
<td>• How do managers and supervisors understand their role and responsibility in</td>
</tr>
<tr>
<td></td>
<td>supporting volunteers?</td>
</tr>
<tr>
<td>Materials</td>
<td>• Are there materials on stress and stress management?</td>
</tr>
<tr>
<td></td>
<td>• Are there training materials for peer support and psychological first aid?</td>
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<tr>
<td></td>
<td>• Are there written protocols for supervising volunteers, and referring staff</td>
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<tr>
<td></td>
<td>or volunteers who need additional support?</td>
</tr>
<tr>
<td></td>
<td>• Are the available materials being used and distributed, e.g., do managers and</td>
</tr>
<tr>
<td></td>
<td>supervisors know about protocols and existing resources?</td>
</tr>
<tr>
<td>Human resources</td>
<td>• How many staff and volunteers act as peer supporters?</td>
</tr>
<tr>
<td></td>
<td>• Who has psychosocial support capacities within or outside of the organization,</td>
</tr>
<tr>
<td></td>
<td>e.g., in-house counselor, local professionals for referral?</td>
</tr>
<tr>
<td></td>
<td>• Are there experienced staff or volunteers willing to share their per-</td>
</tr>
<tr>
<td></td>
<td>spective during orientation or training of volunteers, or act as a buddy?</td>
</tr>
<tr>
<td></td>
<td>• How many managers are trained in supportive supervision and PFA?</td>
</tr>
<tr>
<td>Financial resources</td>
<td>• What kinds of things are we doing that are cost-free, e.g., talking with</td>
</tr>
<tr>
<td></td>
<td>volunteers about wellbeing during their orientation to the organization?</td>
</tr>
<tr>
<td></td>
<td>• What other strategies would we like to develop and what might they cost?</td>
</tr>
<tr>
<td></td>
<td>• What funds are available to develop other needed strategies?</td>
</tr>
</tbody>
</table>

Sample anonymous baseline survey for volunteers

The following sample survey for volunteers is designed to elicit what volunteers currently know and do, in terms of stress and coping, their knowledge of available support from the National Society, and their perceptions of the adequacy of that support. It includes both quantitative and qualitative questions.

In conducting surveys, remember these helpful tips:

- Keep information confidential and anonymous. This may increase the number of people willing to take the survey and their honesty in answering questions.
- Keep questions simple for respondents to understand and answer.
- Keep the survey as brief as possible to increase the number of people willing to respond.
- Include both quantitative and qualitative questions.
- With quantitative questions, make sure the responses go in the same direction to make analysis and comparisons easier. For example, in the questions below, a response of ‘4’ will always indicate something positive about psychosocial knowledge, skills or strategies currently in place.
SAMPLE VOLUNTEER PSYCHOSOCIAL SUPPORT SURVEY

Volunteers are an important part of the work of our National Society in emergencies. In an effort to better provide support to our volunteers, we kindly request your input on this survey. This will help us to better understand how we can support your wellbeing. This is an anonymous survey—PLEASE DO NOT WRITE YOUR NAME ON THIS PAPER.

Please circle the number that best fits how you feel about the question being asked: 1=strongly disagree, 2=disagree, 3=agree, 4=strongly agree

<p>| | | | | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>I have a good understanding about the kinds of stress I may encounter volunteering in emergencies.</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>2.</td>
<td>I know how to recognize signs of serious stress in myself.</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>3.</td>
<td>I have effective strategies for managing my stress.</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>4.</td>
<td>I know how to recognize signs of serious stress in my team mates.</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>5.</td>
<td>I know how to support members of my team during stressful times.</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>6.</td>
<td>My manager/supervisor cares about my wellbeing.</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>7.</td>
<td>My manager/supervisor is available if I need to talk with him/her.</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>8.</td>
<td>My manager/supervisor will reach out to me if I am in distress.</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>9.</td>
<td>I know how to get extra help with stress from the organization, if I need it.</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>10.</td>
<td>I have received information about stress and coping from the National Society.</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>11.</td>
<td>This National Society provides useful support to volunteers in coping with emergency work.</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>12.</td>
<td>My work has been acknowledged by my manager/supervisor and the local branch.</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
</tbody>
</table>

It was a nightmare for me. Flooding everywhere. All I heard was run..run..run.. Lost everything what we built and earned. My elder sister and her two kids escaped from that flash flood. Still I remember how my husband asked us to escape. We took shelter at temporary camp, set up by the Red Cross. I was looking for my husband. He never returned thereafter. I saw his body after two days. I was fed up with everything. What this life was. Lost everything. I was clueless of what to do next. Didn’t even take my meals. But it all changed, my thinking, my feelings after I was introduced to the psychosocial programme. It was another person who I befriended at the camp who introduced me to this programme. I realized I was not the only woman who faced this situation. The programme gave me more strength to face life. After several months I wanted to repay in any way I could to the Red Cross, that’s why now I volunteer for the programme.”

5.2 Developing indicators

Developing useful indicators can help you to measure the support you put in place for your volunteers. The tool below describes how to develop useful indicators from the perspective of staff and volunteers and that include both individual and team well-being. The tool also suggests how you can most easily collect information about your indicators.

These tables include both quantitative and qualitative indicators. Quantitative indicators are things that can be counted, such as the number of volunteers trained or using peer support. Qualitative indicators measure the perceived quality of support, such as how helpful volunteers feel training or peer support is for them. Other ways to capture information include meeting logs and surveys. The following tables provide some sample indicators at each phase of the emergency and suggestions for ways to capture information about the indicator.

DEVELOPING INDICATORS

How can you develop indicators to measure psychosocial support for volunteers?

Choosing which indicators to use in measuring psychosocial support for volunteers depends upon:

- Initial assessments of volunteer wellbeing and needs
- How volunteers and staff define “psychosocial wellbeing”
- How volunteers and staff define “good support.”

By far the best way to identify useful indicators of psychosocial wellbeing is by talking with staff and volunteers to get their perspective. For example, ask them how they recognize if a colleague is doing well or not, and how the team is functioning together.

There are three indicators typically used in psychosocial support interventions:

- Emotional wellbeing: Trust, hope for the future, sense of control, confidence
- Social wellbeing: The ability to interact, assist others, solve problems actively
- Skills and knowledge: Learning how to manage one’s stress or support colleagues.

For volunteer psychosocial support, it is useful to develop indicators for both individual and team wellbeing. Individual stress can affect the functioning of team as a whole, just as team dysfunction can affect the wellbeing of individual members. A well-functioning team can provide a buffer for the stresses of the work and be a support community for volunteers. Examples of individual and team wellbeing are:

- Individual: a score on a self-report questionnaire that measures how well a volunteer feels s/he can manage his/her stress after receiving training.
- Team: the percentage of team members who participate in peer support activities.

What are the ways you can collect information about the indicators?

Consider routine ways of collecting information that do not overburden staff or volunteers. For example, if your National Society routinely trains volunteers for their job or provides them information about stress and coping, you can:

- Keep records of how many volunteers are trained
- Have volunteers fill out a knowledge and satisfaction survey at the end of training
- Keep records of materials given to volunteers during orientation or briefing.

Before an Emergency

**Sample Quantitative Indicators**

- Recruiment and selection
- Orientation
- Briefing and training
- Contingency planning

**Sample Qualitative Indicators**

- Volunteer perceptions on usefulness of existing materials.
- Volunteer perceptions on usefulness of training in stress and coping.
- Supervisor perceptions of usefulness of training in how to support volunteers.
- Staff and supervisor perceptions of adequacy of contingency plans. (This information can be obtained by different means – anonymous survey, open-ended questions, verbal feedback, interviews, focus groups).

<table>
<thead>
<tr>
<th>BEFORE</th>
<th>DURING</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Before an Emergency</strong></td>
<td><strong>Sample Quantitative Indicators</strong></td>
</tr>
<tr>
<td>Recruitment and selection</td>
<td><strong>Existing materials on stress and coping for volunteers (record of existing materials).</strong></td>
</tr>
<tr>
<td>Orientation</td>
<td><strong>Numbers of volunteers who receive information on stress and coping during recruitment and orientation (record of information given).</strong></td>
</tr>
<tr>
<td>Briefing and training</td>
<td><strong>Numbers of volunteers and staff/supervisors trained in stress and coping (training log).</strong></td>
</tr>
<tr>
<td>Contingency planning</td>
<td><strong>Existing contingency plans and numbers of supervisors who know about them (record of contingency plans, survey of supervisors).</strong></td>
</tr>
</tbody>
</table>

**Sample Qualitative Indicators**

- Volunteer perceptions of usefulness of existing materials.
- Volunteer perceptions on usefulness of training in stress and coping.
- Supervisor perceptions of usefulness of training in how to support volunteers.
- Staff and supervisor perceptions of adequacy of contingency plans. (This information can be obtained by different means - anonymous survey, open-ended questions, verbal feedback, interviews, focus groups).

**During an Emergency**

- **Sample Quantitative Indicators**
  - Numbers of volunteers who know where to get help if they need it (anonymous survey).
  - Number of individual and team meetings held by supervisors to support volunteers (meeting log).
  - Numbers of volunteers receiving additional training in stress and coping (training log).
  - Numbers of peer supporters trained (training log).
  - Percentage of team members making use of peer support (anonymous survey).
  - Numbers of referrals made for volunteers to receive additional psychosocial support (referral log).

- **Sample Qualitative Indicators**
  - Volunteer perceptions of their main sources of stress and how well they are coping with the current emergency.
  - Volunteer perceptions of support by their supervisor and peers.
  - Supervisor perceptions on how confident they feel to support volunteers.
  - Volunteer satisfaction with additional training.
  - Volunteer satisfaction with the referral process (for those referred).
  - Volunteer perceptions of usefulness of additional psychosocial support provided (see above).
5.3 When to monitor

Monitoring and evaluating volunteer support is a continuous process that involves checking, learning and feeding back the information gathered to improve support to volunteers. As a manager or supervisor, you are always monitoring the wellbeing of your volunteers. But there are certain key points in time when it is important to check in with volunteers and make sure the system of support is working well, particularly when large or small-scale events happen that involve volunteers. (See tools 28 and 29 for tips for monitoring volunteer support for large or small-scale events.)

Large events or complex situations may include volunteers assisting in response to a mass disaster, a violent incident affecting many people or a prolonged crisis situation. During these situations, it is important to check in with volunteers and teams on a regular basis to be sure the support provided is enough to help them sustain wellbeing. If you are in touch regularly with your team, then it is easier to gauge when individuals may need extra support or referral.

Small-scale events include one-time emergencies, such as a volunteer(s) assisting a family affected by a fire, or incidents where a volunteer(s) is injured, threatened or has witnessed something particularly traumatic e.g., the serious injury or death of a child.

Whether involved in small or large-scale events, it is always good to get staff and volunteers together to discuss if the support was enough. It is often helpful to do this some time after the event has ended, such as a month or so afterward.

Checking in with volunteers and supervisors some time afterwards gives the opportunity for them to process the event, and to reflect on their experience and how it may have affected them. They can also better assess what support was most helpful and what further support they needed at the time – or perhaps still need. It is especially important to do this after a large-scale or mass emergency has occurred.

### TIPS FOR MONITORING DURING LARGE-SCALE OR COMPLEX EMERGENCIES

The following are tips for monitoring during large-scale or complex situations:

- Prepare volunteers for assisting in a complex situation by briefing them on what they may encounter and finding out if they are up to the task at hand.
- In a prolonged crisis, hold short, daily briefing and debriefing meetings and ask team members how they are holding up.
- Schedule regular supervision meetings for individuals and teams responding in complex situations to provide technical, as well as psychosocial support.
- Check in with individual volunteers on a regular basis and ask how they are coping and if they need additional support.
- Consider involving a professional psychosocial support person to check in with individuals or teams working in a very complex or distressing situation.
- When assistance in a large-scale event finishes, take the opportunity to evaluate how individuals and teams are coping, and how the support was for them:
  - Conduct an anonymous survey to find out how volunteers are coping, what support was offered to them and what support they actually used
  - Hold a focus group to ask about the support provided and how to improve support in the future.
  - Hold a meeting with volunteer supervisors or team leaders to ask how they feel individual volunteers and teams coped during the crisis, what support was most helpful, and what additional training or information they may need to better support volunteers in the future.
5.4 Evaluating and learning

In addition to regular monitoring, it is helpful for your National Society to take time once a year to look at the support you provide volunteers, bring together the lessons learned from the experiences of the past year and see what improvements can be made. You can use the information you have gathered along the way, such as reports, meeting logs and surveys and include this in your annual report.

If you have the time and resources, consider also providing the space for managers, staff and volunteers to discuss the report and provide feedback. For example, you can arrange a meeting to find out “how we’re doing with volunteer wellbeing” and to make a plan for following up with suggestions to improve.

TIPS FOR MONITORING DURING SMALL-SCALE EMERGENCIES

The following are tips for monitoring volunteer support during small-scale events:

• Try to find out if the event involved seriously distressing incidents that the volunteer(s) may have been exposed to.

• Check in with the volunteer(s) to ask how their experience was and how they are feeling.

• Check in with the volunteer(s) to find out if they know about and are utilizing available support (e.g., peer support, in-house or external psychosocial support).

• Ask the volunteer(s) if they feel the support they are receiving is enough.

• Keep an eye on the volunteer(s) involved in small-scale events to monitor their behaviour and how they seem to be coping.

• If a volunteer has been directly impacted be sure to:

  • Check in with them as soon as possible to see how they are

  • Prepare to receive them in the office by providing a quiet space to rest, food or drink, and – if needed – professional medical or psychosocial evaluation

  • Find out what support they have available at home, and help them to contact loved ones if they request it to be with them.
“Caring for volunteers” is a toolkit developed to help National Societies, so they can assist volunteers – before, during and after a crisis. Although the focus is on volunteers, it will also provide useful tools for staff. Whether you belong to a large or small society, whether you are often involved in emergencies or mainly work through social programmes, you can adapt the information in this toolkit to your own particular needs.