

Humanitarian aid workers in Uganda show signs of stress, depression, and burnout

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Latest research points to the high risk for mental health problems among staff working in humanitarian organizations in northern Uganda, due in large part to their work environment. A new study by researchers at Columbia's Mailman School of Public Health examined the mental health of 376 Ugandan workers at 21 humanitarian aid agencies and found that a significant number of the staff at these organizations experienced high levels of symptoms for depression (68%), anxiety disorders (53%), and posttraumatic stress disorder (PTSD) (26%), respectively.

Research up to now has focused on international or expatriate staff; the new study looks at humanitarian workers who are nationals of the country where they work. Workers in Gulu, Northern Uganda, are of particular interest because of their high exposure to chronic and traumatic stress following many years of conflict between the Lord's resistance Army (LRA) and the Government of Uganda forces.

Findings are published in the **Journal of Traumatic Stress**.

The study, based on self-reported symptoms, showed that female workers reported significantly more symptoms of anxiety, depression, PTSD, and emotional exhaustion than males. Between one-quarter and one-half of all respondents reported symptom levels associated with high risk for burnout. Chronic stressors such as financial hardship, uncertainty whether peace will continue, separation from close family, and unequal treatment of expatriate and national staff were among those



cited for causing these adverse mental health effects.

"While women reported higher levels of distress than men on four of the outcomes, greater risk of <u>poor mental health</u> among women has been indicated by a number of studies in northern Uganda," says Alastair Ager, PhD, Professor of Clinical Population and Family Health and the study author. Therefore, he cautions against interpreting this trend purely in relation to the demands and exposures of humanitarian work.

Workers with the United Nations and its related agencies reported fewest overall symptoms. In comparison, those working for international NGOs reported significantly more signs of depression. Dr. Ager points to the structure of the UN and related organizations that serves as a protective function for national humanitarian workers.

"Although increased exposure to stressors is an inevitable consequence of working in humanitarian contexts, these findings clearly demonstrate that the characteristics of the organizational environment significantly influence the mental health and wellbeing of staff in such settings," noted Dr. Ager, who is also Director of the Program in Leadership in Global Health and Humanitarian Systems at the Mailman School.

The findings also show that over 50% of workers experienced five or more categories of traumatic events. Higher levels of social support, stronger team cohesion, and reduced exposure to chronic stressors were associated with improved mental health.

There are therefore a number of practical measures that the humanitarian agencies can do to help lessen the adverse mental health reported by workers and fortify social support mechanisms, according to Dr. Ager. These actions are:



- enabling access to the telephone or Internet for personal communications
- discouraging "presenteeism" and excessive hours spent at work
- training managers to explicitly recognize good work performance, resolve conflict within teams, and show a commitment to employee welfare

Provided by Columbia University's Mailman School of Public Health

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