



Knowledge Sheet

Mental Health of Workers Working with Migrants: Strategies for Care and Self-care

MIEUX+ Community in Latin America and the Caribbean



Background

The 4th meeting of the MIEUX+ Community in Latin America and the Caribbean (LAC) took place on 28 June 2022. The central theme of this meeting was the **mental health of care workers working with migrants**, as well as **strategies for care and self-care** for them.

The aim of the session was to facilitate the exchange of knowledge and practices between public officials from the administrations of the LAC region, as well as those carried out by the Member States of the European Union. To this end, the work on mental health and migration of the **Immigration and Refugee Service of the Barcelona City Council** was presented, particularly the **Nausica Programme on the accompaniment in complex social intervention and mental health of the technical teams of the municipal programme for the care of refugees in Barcelona**. This presentation was accompanied by an intervention by the expert **Cecília Gelpí**.

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Mental Health of Care Workers Working with Migrant Population



Theoretical Framework

- **Working with the human suffering** of migrants can have **an impact**, especially on the physical and psychological health of those working with them;
- **Self-care is any activity that we do deliberately, in order to take care of our own mental, emotional and physical health.** It would be an activity, or anything else, that gives us energy, rather than taking it away;
- The **World Health Organisation (WHO) defines self-care** as:
“The ability of individuals, families and communities to promote health, prevent disease, maintain health and cope with illness and disability with or without the support of a health care provider”;
- **Incorporating self-care activities into daily life helps to identify, manage and reduce stress and anxiety.** It also helps to maintain and improve health and well-being in the short and long term;
- Self-care can help prevent negative reactions such as **secondary trauma, compassion fatigue** or **burnout**.

Mental Health Impact and Psychosocial Intervention

1. Possible impact of working with migrant populations

Working with migrant populations, while rewarding, can be challenging for the worker. The professional can be confronted with human suffering, as well as with the life stories of survivors of violence and even torture. Equally, the fact that this professional is continuously exposed to this human suffering makes it inevitable that he or she will be impacted by it.

Recognising the impact and taking responsibility for dealing with it is not only a right, but also an ethical issue in order to be able to better accompany the suffering of others.

2. Compassion fatigue or empathy burnout (Figley 1983 and 1995)

It refers to the cost of help that can lead to an inability to empathise with beneficiaries when sharing their experiences or an unwillingness to bear the pain of difficult stories or provide support. Professionals regularly exposed to traumatic experiences are particularly susceptible to developing compassion fatigue.

The symptoms are:

- **Feelings of helplessness and helplessness in the face of the patient's suffering;**
- **Reduced feelings of empathy and sensitivity;**
- **Feeling overwhelmed and exhausted by the demands of work;**
- **Feeling of detachment, insensitivity and emotional disconnection;**
- **Loss of interest in activities they used to enjoy.**

4. Burnout (Freudenberger 1974; Maslach 1980)

The World Health Organization (WHO) (1998) considers burnout as a syndrome resulting from chronic work-related stress that has not been successfully managed. Its **three characteristic dimensions** are:

- **Emotional fatigue:** emotional exhaustion, lack of energy or lack of motivation to care for people;
- **Depersonalisation:** increased mental distance from work, leading to feelings of negativism and/or cynicism towards people;
- **Self-fulfilment:** feelings of reduced professional effectiveness and low self-esteem.

3. Vicarious trauma (Pearlman 1990 Saakvitne 1995) or secondary trauma

Vicarious trauma can occur to a worker after a single exposure to a traumatised patient or due to cumulative exposure to traumatised person. The professional may begin to experience the same symptoms experienced by those who have suffered the trauma (Post Traumatic Stress Disorder). These are:

- **Re-experiencing** (flashback);
- **Avoidance;**
- **Hyperactivation** (e.g. hypervigilance);
- **Numbness and negative mood.**

5. Positive impacts

Not all impacts are negative; among the positive ones are the following:

- **Compassionate satisfaction:** this is the feeling of satisfaction with the work being done;
- **Vicarious resilience:** is the positive impact on professionals and their subsequent personal growth as a result of their contact with the resilience of migrants;
- **Vicarious transformation:** characterised by a deep sense of connection with others, an increased appreciation of one's own life, as well as an increased sense of meaning of self and hope.

Strategies to Strengthen Self-Care as an Inseparable Element of Comprehensive Protection for Professionals

Professional Care 3x3x3 Matrix

RISKS	RESPONSIBILITY/ RESISTANCES	RESILIENCE
AWARENESS	BALANCE	CONNECTION
INDIVIDUAL	TEAM	INSTITUTIONAL

Cecilia Gelpí Arroyo

<p>Factors that contribute to burnout and to a greater or lesser impact of work: risks from the context of the work itself, as well as from our previous state; responsibilities (self-care as commitment and ethical responsibility) and existing resistances and barriers to care; resilience (as the ability to emerge stronger from experiences).</p>	<p>Fundamental principles or pillars for self-care: awareness (being in tune with one's own needs, limits, emotions and resources); balance (between personal and professional life without falling into the trap of creating a balance subject to work performance, boundaries); connection (breaking the isolation and silence that causes unacknowledged pain and suffering; non-violent communication; supervision).</p>	<p>Dimensions: all of the above variables can be represented in individual, team and institutional dimensions.</p>
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Barcelona City Council, Spain

Nausica Programme on the accompaniment in complex social intervention and mental health of the technical teams of the municipal programme for the care of refugees in Barcelona.

The **Nausica Programme**, implemented by the **Immigration and Refuge Service of the Barcelona City Council**, was conceived as a **complementary initiative aimed at people who had lost their international protection status and lacked autonomy**.

The programme was launched in 2015 during the so-called "refugee crisis". **It arose from the political will** to develop **initiatives to improve support for refugees**, within the vision of Barcelona as a 'sanctuary city' open to welcoming people in vulnerable situations.

Compared to similar programmes, the results of the programme are far superior, with a success rate of almost 50%. That is, **almost 50% of the people supported by Nausica achieve autonomy**.



Good Practices Identified

1. Differentiating between the different types of beneficiaries

The project differentiates between 3 different levels of beneficiaries: individuals, people with families and people with complex and vulnerable situations.

2. Encourage the exchange of lessons learned between the different stakeholders

It is important to encourage the exchange between different actors on lessons learned in order to improve support and quality of services.

3. Putting the focus on collaboration between social entities

The success of the programme is due to the fact that it was originally conceived as a collaboration with different social entities.

4. Focusing on the beneficiaries and proposing adapted solutions

The case tracking that was established in Nausica allowed staff to focus on the stories that people have lived through and to adapt the sometimes inadequate solutions proposed by new ones.

5. Talk about the confidentiality

The issue of confidentiality was discussed to see how information could be shared while respecting people's right to privacy.

6. Trust is a key element in project work.

It seeks spaces for collaboration with transparency. It is not always easy, but the result so far is positive.



Challenges

People seeking protection can experience very difficult situations prior and during their journey. Hence, once they arrive to the country they may be in a poor psychological state.

Large migration flows make good management more difficult. It is easier to provide more personalised attention when flows are smaller and therefore easier to manage. Good practices and lessons learned are also easier to apply in non-emergency humanitarian contexts.



Additional Resources

Tools

- EETS: Secondary Traumatic Stress Scale (EETS; Bride, et al, 2004, adapted to Chile by Guerra and Saiz, 2007);
- Strengthening Resilience: Williams and Poijula (2002). The PTSD Workbook: Simple, Effective Techniques for Overcoming Traumatic Stress Symptoms;
- MBI, Maslach Burnout Inventory (consisting of 22 items to measure the frequency and intensity of Burnout);
- BAI, Beck Anxiety Inventory (consisting of 21 items describing various anxiety symptoms).

Some suggestions for the development of professional self-care skills:

- Habits for better sleep;
- Knowing how to set limits;
- Practice breathing exercises;
- Intentional avoidance and concentration strategies outside the work environment;
- Grounding techniques;
- Managing intrusive thoughts and *flashbacks*;
- Mindfulness;
- Break the cycle of tension and stress with the progressive muscle relaxation technique;
- Stop the tension-anxiety connection by paying attention to our body and doing physical stretching exercises;
- Break the cycle of stress in your mind with visualisation exercises.

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