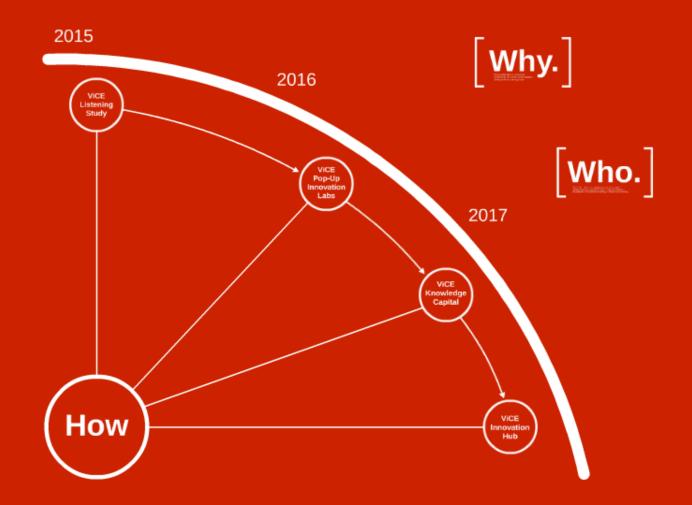
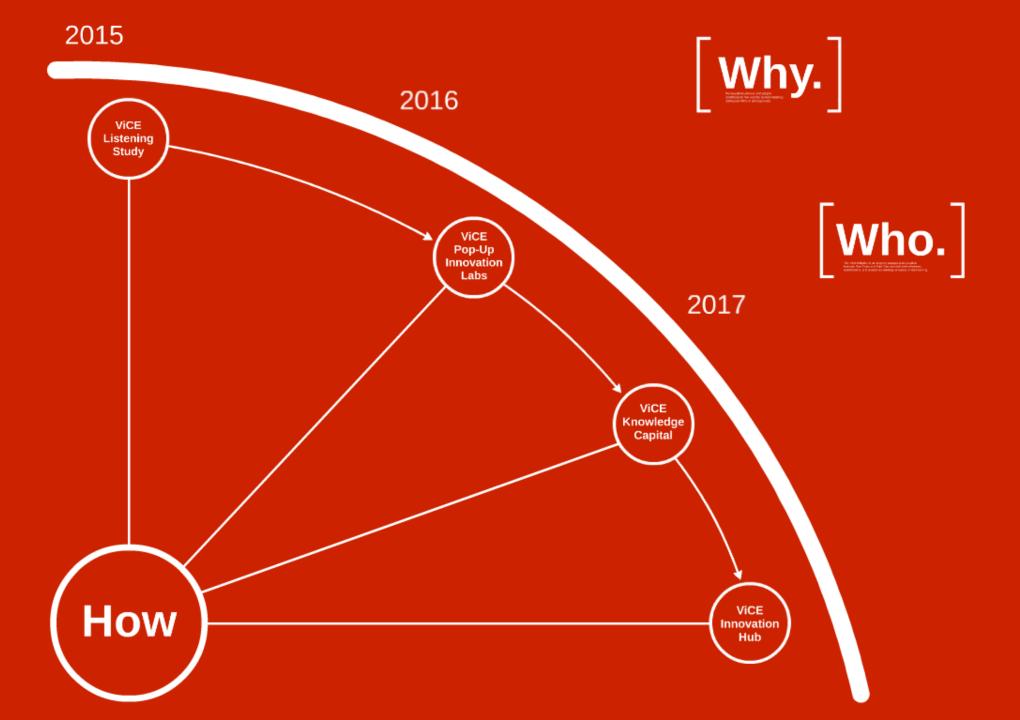
Protect. Promote. Recognize.



ViCE - an initiative on Volunteering in Conflicts and Emergencies





Study? Listening Why the

The gap: significant in understanding and action around protecting, promoting and recognizing volunteers working specifically in conflict and emergency contexts.

The goal: to explore and develop an understanding base of the different challenges, opportunities, positive and negative experiences of volunteers, and responsibilities and actions of stakeholders in conflicts and emergencies.

The focus: on local volunteers volunteering in their own communities, or in neighboring and newly adopted communities in the case of forced and spontaneous migration.

The idea: is to let stories, challenges, motivations, feelings, and suggestions based come forward.

The inspiration: the listening methodology, adapted from the 'Time to Listen' report by Mary B. Anderson, has been chosen as the primary approach to building an understanding of the many aspects of volunteers' experience when working in conflicts and emergencies.

About the Listening Study

Six Listening Studies were carried out during the period September 2015 – April 2016 in six countries;

- Afghanistan,
- Honduras,
- Myanmar,
- South Sudan,
- Sudan and
- Ukraine.

Listening sessions were carried out in 18 different cities, localities, towns, neighborhoods, etc.

In total, 282 people were given an opportunity to be listened to.

Out of these there were 198 volunteers and 84 people relating to volunteers (e.g. staff in the National Societies, ICRC, IFRC, partner National Societies, officials).

Out of those interviewed, 62 % men and 38 % women. The youngest were 16 years and the oldest 66 years.



Allowing for the unexpected to come forward

Through asking one broad, open-ended question at the beginning of sessions with individuals and in small groups, the conversation is steered and owned by the interviewed, with minimal interference by the listeners.

The opening questions have often been: "can you tell us what it is like to be a volunteer here?"

In this way, the interviewed choose what they would like to talk about, which implicitly tells what they see as important to their experience.

This effectively provides time and space to talk about issues, stories, challenges, motivations, feelings, and suggestions based on their own experiences without any unintentionally communicated agenda from the listeners. The duration of most listening sessions was between 45 min and 1.5 hours. All sessions were recorded, transcribed and then translated into English.

The recorded used: Zoom H2N



What did the volunteers say?

Direct threat Communities Gun against head Grenades/shelling

Inability to help People dying Severly injured

Triggers pushing the volunteer of the edge Children Old people People dying When being forced Held hostage Torture Working in the society but not getting involved

Potential threat The fear of something

The stress of not being able to care for the family Carrying the emotional load Charging emotions Bottled up

Multiple exposures

Not being supported

Not being helped Stigmatized

PFA All volunteers

Expectations

someone to address the experiences

Provided with PSS

Requiring space Counselling **Targeted support** Young volunteers Exposed positions

Some of the data

"When I got home I was emotionally charged thinking about all the things that happen many times and as Society we see them but we don't get involved in them.

And it's not the same watching things as a picture, than living them, being there. It's not the same. So, it affects you in the end, that is, it's an extra load on top of the everyday problems one has with one's family and all. It's more, a small extra load.

But I got over all that. Now I try to keep calm. I love to serve, it fascinates me."

"We have had situations in which I have been pointed at with guns because if one patient dies, they are gonna kill me.

That should not be happening. That's not normal. And they tell you when they train you: "That's gonna happen, just act calm and stay safe." And you have all these manuals on what you can do and how you should act. Stay cool, your body language, everything.

But if you have a gun pointed at your head, it's very difficult to stay cool. And you have to be very very very professional just to keep looking at your patient and not looking at their face."

Some of the data, continued

"Yes, because that time I was left kind of... How can I say it? Kind of traumatized, because that had never happened to me before.

Afterwards, let's say, I was satisfied because I did everything that was in my power to help her, but no, she didn't survive.

And I would have liked to be able to talk to somebody, and I think all volunteers need this, being able to talk to someone about whether they have problems at home, if they're depressed, sad, crying, all that." "Somebody is leaving his family behind to go and help someone, but at the same time you are...(inaudible) ...because you are seeing things that are extraordinary and beyond your imagination, a human-being burning beyond recognition is very difficult on a daily basis, people are dying, and you are handling this.

It's very difficult. So...

But I am glad that within NS we have psychological support department, so even the volunteers who arrive today and yesterday, they have a counseling session. So we hope that the volunteers that arrive today, we will try to organize a session, at least.

Because the coordinator is not in, but by tomorrow or next tomorrow, we will try to call him in a meeting, then they have to be counselled, because this is very difficult. You can understand with this scenario, really, it is very difficult. It is very difficult."

Some of the data, continued

"We found a woman that was killed 3 days before and she lie, and there was a baby of 6 months on her back, and the baby...

you know lie on the sun on her back, and the baby was on the back, so it was a kind of...

One of the very very painful histories of my life.

And the mother is almost rotten because now she's become like, big and big and big, and the child was on her back, and the child was alive, but the mother was killed.

So we went there and we removed the child first from the back of the mother, and then we found that the child was alive." "We do it, but we don't get psychological support, or we rarely do. And these feelings get bottled up, and after so many years I do think they end up keeping people awake at night."

"There are things in the Red Cross that mark you for life.

And there are things that have impacted our heart with such force that even today I haven't been able to overcome.

But, here we are, day after day, doing our job and trying that nothing that happened in the past happens in the future."

Some of the data, continued

"I think they get their energy and their support from themselves and from their peers. Because as a NS we really don't have a support system for them.

We don't even have, I don't know, psychological support for the guys who have had really difficult situations. I mean we have people that come back and they are really shattered after their work.

And still the bell rings and they go back.

That should not happen. In theory and as we manage it, and as it should be working, that should not happen.

If you come back, and you've had a very very stressful situation, you have to go back to psychological support.

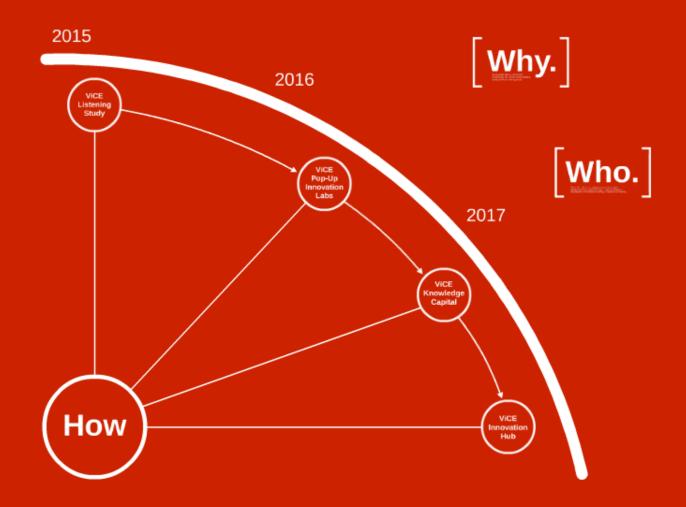
That's how it works... That's how it should work, but as a National Society, we are not providing those services." "Sometimes think we really forget, not just volunteers, but particularly volunteers, but aid workers generally.

We forget about ourselves, and the impact of all this stuff. But when you're part of it, when it's actually part of your community.

And that's what we seem to have, is volunteers embedded into communities. Part of those communities, understanding those communities.

But the emotional impact of that is massive. Uhm, and it's something that, if we don't address we will get into some pretty severe problems."

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