

BRIEFING DOCUMENT / INFORMATION DOCUMENT**Stress and stress management in Ebola deployments – DRC 2026:
A key document for all MSF staff****Introduction**

The humanitarian context is often a challenging working environment, and Ebola responses present additional complexities linked to exposure to infected patients. The stress caused by high mortality rates, the fear of becoming infected or infecting family members, and the ‘do-no-harm’ policy are just a few examples of the complexity of this environment. It is therefore essential to be aware of the impact this environment can have on the general well-being of our staff when they are part of an Ebola project – and, on that basis, how we can mitigate that impact.

1. DURING YOUR DEPLOYMENT**1.1 Sources of stress specific to the Ebola context****1.1.1. Related to the disease****The high mortality rate**

- If you are a member of the medical staff, you will be confronted with numerous patient deaths, including those of children, over a relatively short period.
- If you are a logistics officer or a WASH specialist, you will also regularly be confronted with death.
- Some people will have to deal with placing bodies in body bags, finding solutions to the build-up of bodies, cremating them, and so on.
- If you are a psychologist, you will be required to inform people of the death of a family member and to support families when they view the body.
- For all other roles, you may be affected by the impact that the high number of deaths has on your colleagues.

The limits of medical intervention

- Medical intervention focuses primarily on care (hydration, feeding and personal hygiene for patients, and treating their symptoms) and on attempts to ensure patients retain as much dignity as possible.
- Experimental treatments are very likely to be used on patients.
- In the final stages of the disease, the **symptoms** can be shocking, both for medical and non-medical staff. The condition of patients suffering from the disease can deteriorate rapidly, leading to:
 - bleeding gums, nosebleeds,
 - severe diarrhoea,
 - vomiting,
 - intense suffering, cries of pain,

- hallucinations, etc.

1.1.2. In relation to contagiousness

The need to strictly adhere to biosecurity measures

- The need to remain constantly alert and vigilant to avoid any risk of contamination is exhausting, both emotionally and physically.
- Wearing personal protective equipment (PPE) is physically demanding: heat, sweating and dehydration quickly lead to physical exhaustion.
- Physical isolation: the ban on touching others, even outside working hours, can create a sense of loneliness.
- Pressure to follow strict procedures: a lack of spontaneity, mechanical behaviour, and a reduction in the interpersonal aspect of care.

The risk of becoming infected and of infecting others.

- Even if you follow all protective measures both at work and outside working hours, you may still fear that you are a danger to others and worry that others may be a danger to you.
- This can create mistrust amongst colleagues.
- Similarly, if you develop a fever, diarrhoea, headaches or other symptoms, this will be a source of stress for you, as you will find it difficult not to think about Ebola, even briefly.

1.1.3. Social, health and economic consequences

Stigma

- National staff may be rejected by their families and communities, who fear infection.
- Staff responsible for contact tracing and responding to alerts in the community may be unwelcome, and families and communities may refuse to cooperate.

The consequences of an Ebola outbreak for families, communities and countries

- Fear leads to a deterioration in social ties and local economic dynamics.
- In some regions affected by Ebola, the healthcare system has been severely disrupted, with significant knock-on effects, such as school closures, workplace closures, the breakdown of public services, etc.

1.1.4. In relation to your deployment

Managing personal and family reactions

- Your families may be concerned about the risks you face during your deployment and the risk of infection upon your return. It is important to keep them regularly informed. However, reassuring them takes energy and adds an extra worry.

The possibility of medical evacuation in the event of infection is not guaranteed. Even for non-Ebola cases, the time taken for medical evacuation from a country affected by an outbreak is likely to be significantly longer than usual.

1.2 Possible responses to stress

Stress can be useful, as long as it does not exceed our tolerance threshold. Indeed, stress releases the energy we need to take action, to carry out our tasks and to help us cope with them. In situations where we need to be cautious, where we must pay attention to numerous details in order to identify potential dangers, the heightened alertness brought about by a state of stress is therefore both useful and appropriate.

However, we must all be aware that beyond a certain threshold (which varies from person to person), stress becomes harmful. In addition to the acute and cumulative stress reactions that develop in most emergency situations (fatigue, increased consumption of alcohol and/or cigarettes, sleep problems, difficulties concentrating and with memory, etc.), you may experience other stress reactions specific to the context of working with Ebola:

- A constant feeling of insecurity.
- Intense fear of becoming infected and dying, fear of infecting others.
- A sense of helplessness and guilt
 - treatments that are still uncertain
 - Possible dehumanisation of care: no direct contact, little time with each patient, etc.
 - A lack of resources to contain the epidemic
- A sense of injustice: particularly acute when children are affected and die.
- Extreme vigilance and a sense of isolation linked to compliance with biosafety standards, etc.
- Anxiety, sadness, rigid thinking, etc.
- A feeling of becoming paranoid, etc.
- A feeling of being misunderstood by family and friends who fear infection; concerns about returning home, the reactions of friends and family, the information and explanations to be provided, etc.

1.3 Resources for coping with stress

1.3.1. Personal resources

Look after your basic needs

Make sure you take the time to eat and drink properly, relax and get enough sleep. This may seem trivial, but remember that, in order to look after others, you must first look after yourself.

Take one day off each week. This rule can be difficult to follow without feeling guilty given the workload, but it is essential: it allows you not only to rest, but also to take a step back from your work. This rest period will have a direct positive impact on your alertness, which can ensure your safety and that of your colleagues.

Fatigue makes us more vulnerable and less responsive, more susceptible to the effects of stress and potentially less focused. During an Ebola response, you must maintain a high level of concentration to minimise errors.

Take some time for yourself every now and then

Give yourself permission to spend a little time doing something other than working or talking about work, by engaging in activities that make you feel good: writing, physical exercise, games, reading, listening to music, relaxation exercises or meditation. (Think about what has helped you in the past to cope with stressful situations).

This will allow you to recharge your batteries and help you take a mental break, making stress an occasional rather than a constant feature of your life.

Identify what is within your control and what is not

You'll face many potentially stressful situations that are beyond your control, but on the other hand, you have the power to decide how to respond to them. Try to minimise the impact of stress by talking to your colleagues and using stress management techniques, whilst actively working on the circumstances over which you do have control.

Find meaning in your actions

In a situation where needs seem great and resources insufficient, you may feel overwhelmed by discouragement and frustration. It is therefore important to be able to find and give meaning to what you do, even on a small scale. Remind yourself why you are there, and how you are helping to support our patients and their families.

Your personal support network

Don't forget your family and friends. Stay in touch with them. They will certainly be happy to be there for you.

1.3.2 Within your team

Information

Make sure you have all the information you need and don't be afraid to ask for more (about the virus, symptoms, modes of transmission, prevention and protection measures, etc.). The more we know, the less we are taken by surprise, and this can help us cope better with adversity.

Social support within your team

Be kind to others. People who cultivate a positive and kind attitude find that their mood, energy levels and physical wellbeing improve. It has been proven that an attitude of kindness and gratitude reduces levels of cortisol, the stress hormone.

Make sure you find a ‘buddy’ within the team (someone you get on well with), who will look out for you and for whom you’ll do the same (reminding each other of safety measures, listening to one another, sharing moments of relaxation, etc.)

Express and share your work-related questions, doubts, difficulties, fears and frustrations, as well as your satisfaction, with your colleagues (without touching each other). These exchanges are essential: they help you take a step back from the situation, avoid operating on autopilot, and remain attuned to everyone’s needs.

The health and safety officer on site

Make sure you identify the person responsible for staff health on your project and follow their recommendations to the letter. Do not hesitate to ask them questions about potential risks and to raise any concerns you may have. You are most likely not the only one asking these questions, and sharing them may encourage others to speak up.

If you have any health issues – whatever they may be – **inform** your on-site health officer **immediately**. Do not wait. Do not be afraid of disturbing them unnecessarily.

1.3.3 Early return:

If you feel:

- you are no longer able to do your job
- that negative emotions have got the better of you
- physically and emotionally exhausted
- that you are particularly irritable
- etc.

Consider cutting your deployment short – this would be a healthy and responsible response, both for you and for the project. A well-judged early return will not prevent you from continuing your journey with MSF.

1.3.3. Head Office

Before you leave, you will be in contact with the psychologist, who will work with you on managing your stress. Psychologists will be available throughout your deployment should you feel the need to talk in a confidential and neutral setting – please see the contact details below.

2. RETURNING FROM YOUR DEPLOYMENT

Returning from an Ebola mission presents certain specific challenges. The virus’s incubation period can be up to 21 days. Therefore, during the 21 days following your last potential exposure, any episode of fever or unusual symptom may cause concern, even when the actual risk of developing the disease remains very low.

It is therefore important to remain vigilant about your health during this period. All staff members who have been in an Ebola-affected area must undergo a 21-day observation period, monitored and supported by MSF.

2.1. Returning home to your family

You should make arrangements for your return before you leave. The more precise and accurate information your loved ones have about the illness, protective measures and how the situation is developing, the better they will be able to understand and prepare for it.

The fact that you are returning from a country affected by this highly publicised outbreak will give your friends and family more context about what you have been through than might be the case in other places where MSF operates. Furthermore, the fear they may feel will lead some to choose not to see you during the first few days or weeks after your return, particularly if they have young children. This fear will not always come from the people you expect. This sense of rejection can be difficult to cope with. The best way to overcome it is to provide your family with information about Ebola. Ideally, this information should be given before you leave – but it may be necessary to repeat it on your return.

You will have experienced very intense emotions during this deployment, and these can be difficult to share with others who struggle to imagine the reality, as they do not know the full context.

It is also possible that you were very frightened and did not want to talk about it, for fear of worrying your friends and family. Try to identify a few people with whom you can talk openly about this experience. They do not necessarily have to be family members; they could be friends or colleagues.

Despite these difficulties, you will almost certainly be very happy to see your loved ones again and to be able to rest.

2.2. Returning from an Ebola deployment

- An appointment with the staff health doctor will be arranged automatically on your return to assess the precautions to be taken over the next 21 days.
- Similarly, an appointment with the psychologist will be arranged automatically.
- All IMS personnel are covered by medical insurance that covers physical and mental healthcare costs for up to three months after their return. (Please check with your pool manager if you are a Swiss or US resident)



For further information on wellbeing and mental health during an Ebola mission deployment – whether to help you prepare, whilst on deployment, or afterwards – please contact the Taskforce 21 psychologist

taskforce21-mentalhealth@geneva.msf.org