

Workaround as Practice: Gauging Risk in Ethnographic Method

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Abstract

This reflection questions how “trauma-informed anthropology” as a method and reflexive praxis undergirding fieldwork evolves: How do attempts to mitigate re-traumatisation shape the meanings of the relationship between researcher and interlocutor? Issues of vicarious trauma are similarly near-impossible to anticipate, and there are few existing structures in place to aid researchers during their fieldwork, particularly as it isolates them from existing structures of care in their own lives. In the steps we have both taken to ensure our safety and that of our interlocutors, we ask: Does the workaround then become part of the practice?

Keywords: Trauma, method, positionality, risk, interviews, ethnography.

Introduction

“Make sure you turn away and jump while crossing your arms over your chest with your mouth open.” The instructor crossed their arms and opened their mouth while stating this, demonstrating to the group how to “safely” protect oneself from a bomb explosion.

In Summer 2019, The Scottish Graduate School of Social Science (SGSSS) organised a three-day workshop entitled ‘Ethics and Field Work in Conflict Zones.’ As two pre-fieldwork PhD students, conscious of the risks that might come with our prospective fieldwork, we had dutifully sought out further instruction on how to engage with and minimise the risk to our interlocutors. Sitting adjacent and clutching cups of coffee, we quickly glanced at each other, wide-eyed, trying to take this overwhelming advice in-stride. We had both entered the workshop with the intent to focus concretely on the ethics of ethnographic research, specifically in the hopes of learning how to best insulate future interlocutors from any harm while gathering data.

Our interlocutors belonged, in different ways, to groups who were in some way ‘vulnerable’ or ‘at risk’. As such, we had applied for the extra workshops in an attempt to pre-emptively address this potential harm. As the participants introduced themselves and their research, the breadth of topics was astounding; someone wanted to work with refugees who came to the U.K. as minors and feared for jeopardising their asylum process, another researching violence in oilfields in the Niger delta; another’s research centred on cartel violence in South America and he feared that he might implicate himself in such a way that he would no longer be allowed to visit his in-laws. “A valid fear,” one of the organisers responded. “I got my wife banned from Thailand — and she’s Thai.” When the circumstances of the banishment were addressed, it was to highlight that decisions researchers make during fieldwork may have serious implications that exceed the purview of one’s original ethical considerations, beyond the confines of the research project. The workshop presenters heightened potentially unforeseen risks, and the attendant ethical issues, that may occur during challenging fieldwork in order to ostensibly prepare the participants for their research. Yet this emphasis on risk and trauma also heightened our own concerns about fieldwork generally, and furthermore reinforced the notion that the realities of fieldwork are intangible and inaccessible to the uninitiated.

The workshop was convened by two former war journalists with extensive experience in the Middle East. Their careers were marked by lengthy stays in Iraq and Afghanistan, reporting for highly reputable international agencies throughout the early-to-mid 2000s. The two alternated the sessions; one calm and quiet, the other seemingly functioning on pure adrenaline—and neither held back on their share of personal traumatic

experiences. Much of the guidance we received focussed on preventing bodily injury to ourselves as well as discussions about desensitisation and post-traumatic stress disorder (PTSD).

As young researchers we believed that with enough training, enough guidance, enough advice, enough workshops, enough rubber-stamped forms, harm could be concretely navigated during fieldwork. Instead, fieldwork engendered more questions than answers about the relationships between researcher and interlocutor and the ways in which trauma manifests when conducting ethnography. As two anthropologists who conducted doctoral fieldwork in the US —Ava with African migrants in Philadelphia, Thalia with peace activists in Chicago — who began fieldwork without the intent to focus on trauma, our research practice evolved to centre on the potential of re-traumatisation as our respective projects progressed. As we became closer to our interlocutors, we each began to question if one is able to gauge risk adequately as the research unfolds. The relationship between anthropologist and interlocutor is predicated on continuous discussions regarding the scope of the project, consent, and long-term implications as the contours of research may shift. The intrinsic malleability of fieldwork in practice further complicates the methodological and ethical relationship between anthropologist and interlocutor due to the problematics of anticipating potential harms as research aims may shift and change; even in the best circumstances, it is difficult for the anthropologist to recognise a potentially traumatising question or discussion if the anthropologist has not experienced similar trauma. Critically, there is no uniform definition or categorical experience of trauma, and thus triggers may often be highly subjective. Thinking of the ways in which interpersonal relationships during fieldwork fluctuate, we ask: How do attempts to mitigate re-traumatisation shape the meanings of the relationship between researcher and interlocutor generally, and the research focus specifically? Furthermore, issues of vicarious or secondary trauma are similarly near impossible to anticipate, and there are few existing structures in place to aid researchers during their fieldwork, particularly as it isolates them from existing structures of care in their own lives. In the steps we have both taken to ensure our safety and that of our interlocutors, we ask: Does the workaround then become part of the practice?

Compassion fatigue, secondary traumatic stress (Stemm, 1995, 1997), vicarious trauma (Perlman & Saakvitne 1995), or secondary victimization (Figley 1982), are all synonymous terms. Jenkins and Baird point out that “[d]espite conceptual similarities, their [vicarious trauma and secondary traumatic stress] emphases differ: cognitive schemas vs. posttraumatic symptoms and burnout, respectively” (2002: 423). Also dubbed the “cost of caring” for others by Figley (1982), these conditions denote a type of trauma response. Rather than a primary trauma event, during which the affected person was present and implicated, vicarious trauma comes from the exposure to traumatic stories, becoming “witnesses to the pain, fear, and terror that trauma survivors have endured” (*American Counseling Association* 2020: 10). Symptoms are often akin to PTSD symptoms as vicarious trauma “is a state of tension and preoccupation of the stories/trauma experiences described by clients” (*American Counseling Association* 2020: 10). The literature suggests it is particularly prevalent among people in the human rights field and among advocacy groups (Satterthwaite et al. 2019). Already in 1982 Figley pointed out that “nearly all of the hundreds of reports focusing on traumatized people exclude those who were traumatized indirectly or secondarily and focus on those who were directly traumatized (i.e., the direct victims) in spite of reports suggesting that knowing ‘that a loved one has been exposed to a traumatic event can be traumatizing’ [sic], already existed only twelve short years after the DSM-III included PTSD as a disorder” (xiv). Secondary traumatic stress disorder (STSD) “is the equivalent of PTSD” (Figley 1982: xv).

We include this brief overview of vicarious trauma and re-traumatisation in order to contextualise our fieldwork experiences, which dovetail with an uptick in interest in research on trauma. Concerns around trauma and re-traumatisation (PSoR) outside the sphere of professional mental health workers have been popularised in the last decade through works such as *The Body Keeps the Score* (Van der Kolk, 2014). More recently, it has been pointed out that “[c]oncerns regarding re-traumatisation have been identified as a barrier to delivering trauma-focused therapy for post-traumatic stress disorder (PTSD)” by mental health professionals in the UK (Purnell, Chiu, Bhutani, et.al., 2024). Here, *re*-traumatisation refers to the risk of people re-experiencing or reliving their traumatic experience(s). As such this is not only relevant to mental health professionals, but also to others working with people who have experienced trauma (such as anthropologists). This article is based on our own very personal experiences during our respective doctoral research projects. Trauma was central to our fieldwork, shifting and intersecting through ethical, methodological, and reflexive turns throughout our doctoral research projects. In this short meditative piece, we trace ways in which our attempts to avoid inflicting trauma on our interlocutors became deeply entangled with the trajectories of our projects that complicated our thoughts on the purpose of anthropological method.

(Re)traumatisation and Method - Ava

In 2020, I began my doctoral research in the U.S., in a Philadelphia neighbourhood heavily populated by immigrants from West Africa. With research centring on the multiple ways in which African migrants navigate and engage with regimes of medical and immigration surveillance, I entered my fieldwork concerned about the ethics of ethnography of medicine and bodies. Furthermore, many of my interlocutors were from Liberia and Sierra Leone, having left those two countries during their respective civil wars in the 1990s and early 2000s, or later during the Ebola epidemic in 2014-2016. Other interlocutors had arrived from different countries across West Africa and were attempting to regularise their immigration status through different immigration channels, primarily asylum. In my interviews, I learned how my interlocutors seeking asylum—as well as those from Liberia and Sierra Leone who had already received it—had narrated their trauma, essentially legally compelled to perform their humanity to immigration officers and judges in order to be deemed worthy of protection. During interviews when interlocutors would tell me about the pre-migration experiences that formed the basis of their asylum claims, their reasons for leaving their home countries, or their current struggles in America, I always listened. On the one hand, strategic silence can be crucial for establishing trust early in the research relationship by highlighting one's intention to be present: "The participant is constantly using the interview to assess whether the researcher can be trusted with sensitive information," (Plummer et al. 2014: 12). On the other, I made a specific point to never directly ask anyone about their experiences of war, violent conflict, or epidemics in order to hopefully avoid any re-traumatisation. Lisa Malkki (1995) notes that her politically charged fieldwork was successful because she was willing to "...leave some stones unturned, to listen to what my interlocutors deemed important, and to demonstrate my trustworthiness by not prying where I was not wanted" (51). Despite my attempts at pre-fieldwork preparedness, I was thoroughly unprepared for the ways in which this decision to "leave some stones unturned" would become central to both methodology and ability to navigate interpersonal relationships integral to ethnography.

When discussing personal histories of migration with interlocutors, I could not help but to reflect on the ways in which my own anthropological research also very much relied on taking and dislodging individuals' stories and traumas from their lives for my own academic needs. This developed into a creeping fear of knowledge itself. This personal fear of information that I would glean from ethnography, the data that would form the basis of my thesis, manifested in ways that indelibly shaped my relationship with interlocutors and with my research project generally. I knew that "...the actual experience of being interviewed may give rise to unexpected negative emotions that even the most sensitive questioning on the part of the interviewer cannot fully guard against" (Watts 2011: 305). Yet I was deeply concerned that I would somehow make an interviewee feel as if they had to discuss something traumatic, or that I had unintentionally broached a traumatic subject, or even that the interview itself would become a source of trauma.

In instances where the interviewee became overwhelmed, I would offer to pause or end the interview and provide information about available services at organisations for further support. I offered this connection to care with trepidation because it often came to pass that the individual in question was unable to receive the needed support, primarily due to issues with documentation and/or lack of health insurance. "Direct services providers, while confronted with difficult material, can ameliorate feelings of helplessness by intervening to change the patient's life. Teachers and researchers may not be able to seek this redemptive alternative" (Stamm 1997: 2). The connection to further services was rooted in as much of a concern for my interlocutors' wellbeing as it was a wide-eyed idealism of combatting the extractive nature of anthropological research. In a similar vein, I configured the decision to avoid first broaching certain topics as a way to preclude re-traumatisation. Beyond establishing a relationship of trust, rapport means showing people that you are actively listening with the intent to understand their experiences (Leech 2002: 665). The decision to "leave stones unturned" was an attempt to let interlocutors to take the lead over their lived experiences, as well as to prove my trustworthiness as an interested listener keen to learn about all aspects of their lives, as opposed to fixating on specific aspects for the sake of research.

The helplessness which researchers may feel when working with communities who have collectively and individually undergone different forms of violence may lead to compounding experiences of PTSD for the researcher. As Thalia deftly underscores in the following section, the impact on the researcher of hearing and bearing witness to trauma during fieldwork are not resolved upon finishing research. Feelings of guilt, shame, and fear during fieldwork are common, as is the pressure to gloss over the difficulties encountered in the field—as well as their continued effects after returning from research—in order to be seen as "professional" upon return to one's university or institution (Pollard 2009). My attempts to mitigate re-traumatisation during

fieldwork ultimately emerged as a methodological tool for building trust with my interlocutors, yet it did not alleviate personal challenges conducting fieldwork, and the complicated feelings I encountered after exiting the field.

(Secondary) Traumatic Stress and Method - Thalia

While engaged in fieldwork in Chicago, U.S. and the South of England in 2019-2020, I knew there would be a possibility some of my interlocutors had had traumatic experiences, and that a specific subset of them had PTSD. Some of my fieldwork groups consisted of peace activists, and one of these groups was made up entirely of ex-military. Conducting a joint degree (Modern Languages and Social Anthropology) with a background in Comparative Literary Studies rather than Social Anthropology, one difference stood paramount now. Before, I had been told interacting with literary texts through discourse analysis was essentially limitless, as long as there was a sound argument, if I could 'argue it out'. However, with human participants this singular focus on people's expressions is ill advised, even problematic. In light of the research I was embarking on, trauma seemed a particularly pressing and potentially problematic element of my developing practice.

Traumatology is a wide field spanning from medicine and psychology to comparative literature and memory studies. While we, as anthropologists, are not psychological experts and thus do not involve ourselves with the evaluation or treatment of psychological trauma, there must be a baseline awareness of the effects of severe mental or emotional stress in order not to trigger it accidentally. As Ava pointed out above, the challenge when dealing with trauma in the context of ethnographic work is twofold: there might be the presence of trauma in the lives or past of one's interlocutors, but when processing this data, trauma must also find a home conceptually within the writing-up process (for the researcher). Traumatology as "the field of traumatic stress studies" (Figley 1982: xiii), is thus present in ethnographic method. Taking from my own academic background, the fields of literary and memory studies supplied additional conceptual frameworks for the anthropological method of gathering and processing data (see, for example: Caruth 1996; LaCapra 2001). Traumatology provided insights into data gathered from my interlocutors;

Several of the peace activists I encountered, and especially (but not exclusively) veteran peace activists seemed to struggle with trauma and/or PTSD. The ways in which they relied on their activist community—through conversation with others, but also through placing their bodies on the street in remembrance or protesting—meant that all the activists were in some way exposed to these experiences. (Ostendorf 2023: 202)

In the field it became soon apparent that military veterans who found their way to peace activism often arrived there via their attempts to deal with trauma and PTSD, rather than through conviction not born of such 'rupture events'. With 'rupture events' I mean to point to the narrative quality of life and memory, in the sense of a "sudden event or dramatic turning point" (Müller-Funk and Ruthner 2017: 3). Such narrative rupture is usually reserved for history and historiography but bears relevance on the individual. However, while I watched for re-traumatisation in ways for which our training prepared us, these interlocutors were themselves highly aware of their own mental state, and conversation that mentioned sensitive subjects was guided by their clear boundaries. Moreover, when sensitive subjects *were* directly addressed, it was in the context of their meeting each other, rather than my specific fieldwork. As quoted above, within non-veteran peace activist communities, the communal living situation and focus on community of the groups means that the burden of emotional care is placed onto the other activists. While this builds rapport and community, the practice can be taxing for members of that same community, especially when this concerns (unprocessed) trauma. Members come from different walks of life, are not mental health professionals, and are thus not necessarily equipped—and neither was I as a researcher.

Early on I had elected to avoid certain questions, only asking arch-of-life questions. Like Ava described with her intent, the general approach was to only desire information if people offered it. This meant that when one veteran stated that 'I did not know what he had done' when we were talking about Afghanistan (on his instigation), I did not inquire further—and to this day I do not know what actions he hinted at. My choice stemmed from the knowledge that PTSD is a trickster and symptoms can be triggered unexpectedly; letting the interlocutors decide on what memories they wanted to vocalise was my attempt to control the uncontrollable.

An unforeseen difficulty made itself known through the symptoms that I started to experience around the halfway mark. They included loss of appetite combined with sudden weight loss, disruptions in personal relationships, the inability focus on text (and so, to read) apathy, and what was termed 'disruption in self-

capacity'; the ability to 'maintain positive sense of self, ability to modulate strong affect, and/or ability to maintain an inner sense of connection' (*American Counseling Association* 2020: 11). In my case, this was a lack of emotion which extended to my actions; when I did things I would have deemed 'out of character' I registered that realisation but as it elicited no feelings or emotions I would simply continue with the action. This all caused me to feel further removed from myself. The experience of being constantly available to the traumatic stories of my interlocutors had left me with PTSD-like symptoms, but this only became clear to me once I had left my fieldwork locales. I knew of primary trauma through primary stressors and had tried to prepare myself, but I had not accounted for secondary trauma.

The core of secondary trauma is the acknowledgement that people who are not directly at risk in traumatic situations can nevertheless end up traumatised (Figley 1982: xvi; 4-5). The fact that trauma is not only related to risk, but also to witnessing harm, hearing or seeing the harm done to someone, and having done harm, complicates simplistic notions of what constitutes trauma and traumatic events. Much like the notion of 'moral injury', it requires deeper engagement with what might be considered traumatic to humans. 'Moral injury' refers to those people who have acted in contrast to their own moral beliefs, transgressing their own moral boundaries and suffering the psychological consequences of this moral transgression (Theixos 2016: 9). Helena Theixos points out that 'studies indicate that soldiers who killed others in combat experienced high instances of shame, regret, remorse, and debilitating psycho-social disorders as compared to soldiers in combat who did not kill' (ibid). Acting rather than witnessing lies at the heart of moral injury. Drescher et al. define moral injury as a "disruption in an individual's confidence and expectations about one's own or others' motivation or capacity to behave in a just and ethical manner" (2011: 9). Theixos further argues that: "What is emerging in these studies is a unique set of moral beliefs which certain moral wrongdoers hold about their own moral goodness, character, and belonging, in very sharp contrast from soldiers who witnessed, but did not perpetrate, serious moral wrongs" (2016: 9).

A number of the veteran interlocutors suffered from moral injury, which were addressed alongside other aspects of PTSD, and in some cases seemed the main problem from which they suffered. In one case, an interlocutor was sharing details of one exploit, and the disturbing nature of the details that came out and the emotion it was paired with on the part of the storyteller, pushed that suffering and moral ambiguity into the interaction. Additionally, they admitted to a particularly egregious episode of violence during their service. In such cases it is not always possible to act; feelings would be hurt, trust damaged, and research contacts potentially even severed. Even if there is the strong desire to walk away from the interaction, it would be at the risk of valued interpersonal relationships. These relationships are the basis of the trust on which much of our anthropological research is built. Walking away, or, for example, voicing differencing political opinions could damage these relationships, and place us at opposing ends of what is, in the end, the same political arena (as we are not studying distant peoples but people in societies where we live or have lived ourselves). Moreover, the nature of participant research which involves extended stays at field sites (even in people's houses), making clear boundaries impossible: are we researchers, or guests, or friends? And, as was so poignantly detailed above, what does it mean when we rely on the narratives that are shared with us for our academic research? What does it mean for these relationships, how are we in turn dependent and responsible?

Attempts to mitigate (re)traumatisation shape the meanings of the relationship between myself and my interlocutors entailed not only protecting my interlocutors by avoiding touching on certain subjects directly, but at times (and at times primarily) also in an attempt to protect myself. In hindsight, what I considered to be limitations of myself as a researcher, and possibly even selfish acts I pushed beyond, were in fact moments that caused the deterioration of my mental health and led to an eventual secondary traumatic stress (STS) diagnosis.

Concluding Thoughts

This brief collaboration sought to reflect on the ways in which the risk and fear of trauma was inherent to ethnography in practice, as well as an outcome of our respective fieldwork. First, thinking about the potentials of re-traumatisation informed the scope of ethnographic inquiry and shaped the contours of rapport between researcher and interlocutor. Second, the act of listening and engaging with interlocutors about their traumatic experiences culminated in post-fieldwork stress. Listening to interlocutors relaying stories of fear, pain, and suffering may result in similar feelings of fear, pain, and suffering because, as Figley points out, we care, and this is "the cost of caring" (1982: 1). As researchers rather than mental health professionals, we felt limited in our ability to interfere, an issue which Stamm points out is an alleviating factor for direct service providers (1997: 2). Even though they might be confronted with difficult material or situations, they might attempt to change the

patient's life whereas researchers may not be able to intervene, either due to their position or because the trauma occurred in the past. Stamm further points out the discussion around "the use of debriefing to reduce researchers' traumatic reactions to the research material" (Stamm 1997: 2).

The "Ethics and Field Work in Conflict Zones" workshop identified this need for debriefing to us pre-fieldwork researchers. However, de-briefing in a journalistic or therapeutic context might already be a more established practice, but when it comes to fieldwork, this was an entirely new suggestion that was hard to shape. De-briefing during fieldwork singles out the supervisor as a possible candidate for this process, but the entanglement of (perceived) hierarchical power structures and one's further career might hinder the development of such structures of support. And, of course, PhD supervisors are not mental health professionals either. Beyond the usage of de-briefing as a means of working with the researcher to deal with the emotional and psychological effects of fieldwork, de-briefing represents an opportunity to think about the ways in which the stresses, fears, and traumas encountered during fieldwork informed the trajectory of fieldwork in practice (i.e., the ability to conduct research as planned or desired) as well as contributing to the continued discourses on changing methodologies within ethnography. This is not to argue that de-briefing should place the anthropologist at the centre of research at the expense of interlocutors, weighing their voice and experiences as of equal importance.

Instead, we contend that opening spaces between PhD students and supervisors and between researchers and institutions during and after fieldwork in order to discuss concerns is integral to both ensuring sound ethnography in practice as well as addressing the multitude of effects of fieldwork on researchers. As first year doctoral students, we attended a workshop in the hopes that it would prepare us for fieldwork. As anthropologists, we now recognise the dearth of programmes and institutional discussions about trauma during and after fieldwork is manifold. This dearth is resultant of the inability to fully encapsulate the paradox of a universal method that is ultimately a highly subjective experience, as well as differing opinions about the role of reflexivity *beyond* methodology. We suggest that there is no ideal model, nor an easy fix to ethical quandaries, but that experienced researchers should work together with students to develop appropriate programming and to foster dynamic discourses within institutions about the effects of fieldwork on researchers and interlocutors. Indeed, the collaboration on this reflexive piece comes from a friendship that formed on the heels of the SGSSS workshop, when we as PhD students shared the difficulties and trauma we came across in our respective field sites.

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