PREVENTION OF BURNOUT AMONG THE PROGRAM TEAM ADDRESSING GROSS HUMAN RIGHTS VIOLATIONS DURING ARMED CONFLICT IN NEPAL

A Research Project Paper
Presented to
The Academic Faculty of
Paññasāstra University of Cambodia

By

ANTINA RANJIT

In Partial Fulfillment of the Requirements for
The Degree in Master of Arts
Major in Applied Conflict Transformation Studies
Faculty of Social Sciences and International Relations

PAÑÑASĀSTRA UNIVERSITY OF CAMBODIA

Phnom Penh, Cambodia

November 2025

PAÑÑASĀSTRA UNIVERSITY OF CAMBODIA

PREVENTION OF BURNOUT AMONG THE PROGRAM TEAM ADDRESSING GROSS HUMAN RIGHTS VIOLATIONS DURING ARMED CONFLICT IN NEPAL

Approved by:

DR. SIN MENG SRUN, Chairperson

DR. DESMOND MOLLOY, Major Professor

PROF. KEVIN NAUEN, Member

PROF. ELIZABETH PADILLA, Member

PROF. KARLOS MANLUPIG, Technical Advisor

ABSTRACT

This action research explored how to prevent burnout among program teams working with survivors of gross human rights violations from Nepal's armed conflict. The study was carried out in five conflict-affected districts, Dang, Rolpa, East Rukum, Kailali, and Kanchanpur, where the Nagarik Aawaz's partner organization support survivors of conflict-related sexual violence. Using Participatory Action Research, the process moved through three cycles of planning, action, and reflection. Data were collected through focus group discussions, key informant interviews, stress inventories, and ongoing reflections with the team. The findings showed that staff often experienced emotional exhaustion, secondary trauma, and reduced motivation due to repeated exposure to survivors' stories, high workloads, and weak institutional support. Cultural stigma around mental health further limited their willingness to seek help. To address these challenges, strategies such as mindfulness practices, vicarious trauma training, peer support groups, team-building activities, and individual counseling were introduced and developed. The results indicated that these approaches helped reduce stress, strengthened resilience, and adopted a culture of care within the organization. The research concludes that preventing burnout requires not only personal coping strategies but also collective and institutional systems that recognize the emotional weight of this work. These insights offer practical guidance for organizations supporting survivors in post-conflict settings and highlight the importance of implanting long-term well-being practices into institutional structures.

ACKNOWLEDGEMENTS

I am deeply grateful to all the colleagues, respondents, and mentors who made this action research possible. I dedicate this work to the survivors and to the program teams whose resilience and commitment to justice continue to inspire me. My heartfelt thanks go to Nagarik Aawaz, Dr. Susan Risal, CEO, the program team of Nagarik Aawaz, the program team of Nepal Women Community Service Center, the program team of Conflict Victim Single Women Development Center, Ms. Sikha Bhattarai, the ACTS alumni. Their openness in sharing experiences and reflections laid the foundation for this study. I sincerely thank the Centre for Peace and Conflict Studies (CPCS) for the opportunity to participate in the Applied Conflict Transformation Studies (ACTS) program, which has not only strengthened my learning but also supported me with guidance, encouragement, and constructive feedback throughout the research process. I am especially grateful to my supervisor, Prof. Karlos Manlupig, whose thoughtful advice kept me focused and grounded. Finally, I would also like to acknowledge my family and classmates for their constant support, patience, and understanding as I balanced professional responsibilities with the demands of this research journey.

TABLE OF CONTENTS

LIST OF ABBREVIATIONS

CRSV	Conflict-related sexual violence
CVSWDC	Conflict Victim & Single Women Development Centre
FGD	Focus Group Discussions
ICTJ	International Center for Transitional Justice
KII	Key Informant Interview
NA	Nagarik Aawaz
NWCSC	Nepal Women Community Service Center
OHCHR	United Nations High Commissioner for Human Rights
PAR	Participatory Action Research
PTSD	Post-Traumatic Stress Disorder
STS	Secondary Traumatic Stress
TRC	Trust and Reconciliation Commission
VT	Vicarious Trauma
WPF	Women Peace Facilitators

LIST OF FIGURES

CHAPTER ONE

INTRODUCTION

1.1 Conflict Analysis

1.1.1 Impact of Nepal's Armed Conflict

The decade-long armed conflict in Nepal (1996–2006) brought immense suffering to many people (Bhandari, 2015). The war deeply impacted the country, affecting its people, politics, and economy in many negative ways. Thousands lost their lives, while many others faced serious human rights violations, including forced disappearances, torture, and sexual violence (R, 2017). These traumatic experiences left lasting physical and emotional scars on survivors.

Even though the war ended years ago, its effects are still felt today. Many individuals, families, and communities continue to struggle with the pain of loss, trauma, and injustice. The memories of violence make it hard for survivors to heal completely, as they still face challenges in their daily lives.

One of the most severe human rights violations during the conflict was conflict-related sexual violence (CRSV). The exact number of survivors remains unclear because many cases were never reported due to fear and social stigma. However, estimates suggest that thousands of women were affected. Reports from the Office of the United Nations High Commissioner for Human Rights (OHCHR) confirm that both state security forces and Maoist insurgents were responsible for systematic sexual violence, leaving survivors with long-term physical and psychological harm (OHCHR, 2012).

A study by the International Center for Transitional Justice (ICTJ) estimated that around 1,500-2,000 women experienced sexual violence during the conflict (Justice)., 2014). However, experts believe the real number is likely much higher due to underreporting.

Since many cases remain undocumented, there is a strong need for survivor-centered justice and long-term psychosocial support. Breaking the stigma surrounding CRSV and ensuring survivors have access to mental health resources must be a key part of Nepal's post-conflict recovery efforts.

1.1.3 Challenges Faced by Survivors

Even though the war or conflict has officially ended, many of the people who lived through it are still suffering in different ways. They are waiting for justice to be served, hoping that those responsible for their pain will be held accountable (Robins, 2012). They are also in need of financial compensation to help them rebuild their lives, as many have lost their homes, jobs, or loved ones. On top of that, they require emotional and psychological support to heal from the deep trauma they have experienced (Kienzler, 2020).

Unfortunately, the response from authorities and organizations has been slow or insufficient. Because of this, their pain continues, making it incredibly hard for them to move forward (Kienzler, 2020). They find themselves trapped in a cycle of waiting, hoping, and struggling, with little progress in truly recovering from the horrors they endured. The situation is not just about individual suffering; it has created a complicated reality where entire communities face difficulties in healing. True recovery is still far from reach, as many obstacles stand in the way of closure and a fresh start.

1.1.4 Role of Nagarik Aawaz in Post-Conflict Recovery

Organizations like Nagarik Aawaz play a vital role in helping conflict-affected individuals. They provide psychosocial support, promote peace-building, and advocate for justice. However, working in this field is challenging due to the deep emotional and social scars left

by the conflict. Supporting survivors requires sustained efforts, understanding, and compassion (Sharma, 1998).

Nagarik Aawaz has been working actively to support people affected by the armed conflict in Nepal. The organization focuses on addressing the emotional and psychological impacts of conflict through various programs aimed at healing and recovery. Its work emphasizes creating safe spaces for conflict survivors to share their experiences and rebuild their lives.

One of its key initiatives is carried out in the districts of Dang, Rolpa, Rukum, Kailali, and Kanchanpur, areas deeply affected by the conflict. These districts faced severe violence, large-scale displacement, and economic challenges during the conflict years. Recognizing the unique needs of these communities, Nagarik Aawaz partners with local organizations to ensure better outreach and impact.

1.1.5 Community Based interventions in Conflict Affected Districts

In Dang, the organization collaborates with the Nepal Women Community Service Center (NWCSC), while in Kanchanpur, it works with the Conflict Victim & Single Women Development Centre (CVSWDC). These partnerships strengthen support systems by providing counseling, skill-building, and community reintegration programs. Together, they aim to help conflict survivors heal, regain stability, and lead hopeful, self-reliant lives.

Program teams working with conflict-affected communities face significant challenges because of the sensitive nature of their work (Haider, 2009). They support survivors of conflict-related sexual violence (CRSV), families of missing persons, and victims of torture. This means they often listen to painful stories of trauma and suffering, which can be emotionally overwhelming.

Despite their dedication, working in such intense environments may affect the mental health of these teams. Constant exposure to distressing stories can lead to secondary trauma, where

they experience emotional stress similar to the people they are helping. This can cause feelings of sadness, anxiety, and helplessness over time.

1.1.6 Risk of Burnout among the Program Teams

If team members do not get proper support, they may feel emotionally exhausted, losing the energy and motivation to work. This can lead to burnout, harming their well-being and making them less effective. In some cases, they might even leave their jobs, making it harder for organizations to support vulnerable communities consistently.

Working with survivors of severe human rights violations is emotionally demanding (Knuckey, 2017). Frontline workers, such as counselors and women peace facilitators (WPF), Coordinators must remain emotionally strong while listening to painful stories and supporting survivors through their healing process. This work requires understanding trauma deeply, showing compassion, and maintaining resilience despite the emotional state it takes.

In Nepal, the socio-political environment makes this work even more challenging. Transitional justice processes have been delayed, and the government has shown limited accountability for past violations (Singh, 2020). Survivors often face stigma from their communities, making it harder for them to seek help. These unresolved issues add extra pressure on those providing psychosocial support.

1.1.7 Addressing Burnout

As a senior psychosocial counselor at Nagarik Aawaz, I supervise the mental health support provided to program teams working in different districts. My primary responsibility is to ensure that team members supporting conflict-related sexual violence (CRSV) survivors receive the emotional care they need. This involves conducting regular check-ins, organizing reflective sessions, and offering capacity-building workshops to strengthen their skills and resilience.

Even with these supportive measures in place, I often notice signs of stress and burnout among team members. Working closely with CRSV survivors can be emotionally demanding, leading to fatigue, emotional exhaustion, and sometimes even secondary trauma. These challenges highlight the importance of strengthening mental health support systems for the respondents working in such high-pressure roles.

To address this, I believe more structured and preventive mental health strategies are essential. This could include regular counseling sessions for staff, peer support groups, and tailored training on managing emotional stress. By creating a supportive environment, we can better equip our teams to provide compassionate care while safeguarding their own well-being.

Many program the respondents face challenges because they lack awareness about mental health and feel discouraged from sharing their struggles due to cultural taboos. Talking about personal difficulties is often seen as a sign of weakness, making the respondents less likely to seek help when they need it. This can cause emotional issues to build up over time.

Balancing personal and professional responsibilities becomes even harder for team members working in remote areas with limited resources. They often deal with heavy workloads, difficult living conditions, and being far from their families. This can increase feelings of stress and isolation.

When the respondents are overwhelmed by these challenges, their well-being suffers, affecting their ability to do their jobs effectively. Supporting team members' mental health is essential, as it helps them perform better and ensures the success of the programs they implement.

Institutional challenges play a significant role in increasing the risk of burnout, particularly in fields like human rights work. The pressure to meet work demands, combined with personal

struggles, can create a very stressful environment. For professionals in these fields, the emotional weight of witnessing and addressing difficult issues can be overwhelming, making it hard to maintain energy and motivation over time.

The emotionally demanding nature of human rights work, such as working with survivors of violence or trauma, can cause professionals to experience exhaustion and emotional fatigue. This constant exposure to distressing stories and situations can leave individuals feeling drained, making it harder to remain engaged in their work. Without proper support, these feelings can grow, leading to burnout.

1.1.8 Building Resilience to Prevent Burnout

Preventing burnout among program teams working on human rights issues is crucial for maintaining effective and sustainable work (Satterthwaite, 2019). These teams often deal with challenging and emotional instable situations, which can lead to exhaustion and reduced effectiveness. It is important to explore strategies that can help prevent burnout by focusing on different aspects of the team's well-being and support. These strategies need to be proactive, addressing not only the personal coping mechanisms of team members but also the larger organizational and systemic factors that contribute to stress.

A key element in preventing burnout is building resilience within the team. Resilience refers to the ability of individuals and groups to recover from stress and adversity (Windle, 2011). This can be achieved through training, support systems, and creating a culture of well-being where team members feel valued and supported. Teams should be encouraged to develop skills that help them manage stress, such as self-care practices, emotional regulation, and healthy work-life balance. Organizational support is essential in ensuring that these skills are nurtured and that the work environment fosters growth, learning, and collaboration.

This research focuses on the issue of burnout among the program team addressing gross human rights violations during the armed conflict in Nepal, with particular emphasis on the psychosocial counselors working with conflict-affected individuals, including survivors of conflict-related sexual violence (CRSV). The program, implemented by NA in Dang, Rukum, Rolpa, Kailali, and Kanchanpur, aims to prevent burnout and provide effective support for both survivors and counselors in these districts, which have been significantly affected by the armed conflict.

The root of the problem lies in the complex and prolonged impact of the armed conflict, which has left deep psychological scars on individuals and communities. The counselors working with survivors are exposed to secondary trauma, which, if not adequately addressed, leads to burnout, affecting their ability to provide quality care. This burnout is exacerbated by the high demands of the work and the emotional burden of dealing with severe human rights violations, including sexual violence.

The conflict context is essential to understanding the nature of the problem, as the aftermath of the conflict has resulted in prolonged suffering for many individuals in these regions. The scope of the issue is not limited to the counselors' emotional and psychological well-being but extends to the effectiveness of the program in supporting CRSV survivors and other vulnerable individuals. Previous studies have explored burnout in humanitarian settings, but few have specifically focused on the prevention of burnout among psychosocial counselors working with survivors of conflict-related violence in Nepal. Moreover, there is a gap in understanding how burnout prevention can be integrated into the broader context of post-conflict healing, especially in communities that have experienced intense trauma.

By addressing these gaps, this research aims to provide valuable insights into the prevention of burnout among counselors and contribute to the development of effective strategies to

support both program the respondents and the survivors they assist. Through action research, the study will explore the challenges faced by counselors in Dang, Rukum, Rolpa, Kailali, and Kanchanpur, and offer practical recommendations for improving psychosocial support systems. This research serves as a bridge linking the reader to the broader issue of trauma-informed care and the critical need to support those who are on the frontlines of healing and recovery in post-conflict Nepal.

1.2 Work Context

Nagarik Aawaz (NA) is a non-profit organization focused on promoting peace in a country with increasing insecurities and an unresolved past. It was founded in 2001 during Nepal's armed conflict (1996-2006). Even after more than two decades, the issues that caused the conflict still remain, and structural violence is growing rapidly. Nepal has not yet addressed the harms caused by the conflict, and many human rights violations remain unaddressed. NA is committed to a Just and Peaceful Nepal, believing that youth and women are key to achieving this goal. The organization invests in and creates spaces for women and youth to become transformative peace leaders. These changes are personal, psychological, social, and cultural. Empowered youth and women have the ability to challenge harmful structures that promote violence. NA designs programs that promote peace in communities, where the people themselves are responsible for maintaining it.

Currently, NA is implementing a program in the districts of Dang, Rukum, Rolpa, Kailali, and Kanchanpur, regions significantly affected by the armed conflict in Nepal. The program aims to address gross human rights violations, with a special focus on conflict-related sexual violence (CRSV) survivors and other vulnerable groups. The initiative involves psychosocial counseling, community mobilization, and capacity-building activities to promote resilience, healing, and empowerment among affected individuals and families.

In my role as a Senior Psychosocial Counselor at NA, I supervise a team of counselors working directly in these districts. My responsibilities include providing technical guidance, conducting supervision sessions, and ensuring that counselors receive adequate support to manage their workload effectively. Given the emotionally demanding nature of this work, I recognize the critical need for strategies to prevent burnout among program team members.

To address this concern, I am conducting action research focusing on preventing burnout among the program team addressing gross human rights violations. This research seeks to explore the challenges faced by counselors and other team members while working in post-conflict settings and to develop context-specific interventions for enhancing their well-being and professional sustainability.

The action research process involves participatory methodologies, including regular reflections, peer support sessions, and capacity-building workshops. By actively engaging the program team in this research, we aim to co-create practical strategies that promote self-care, emotional resilience, and long-term professional development. This effort aligns with NA's broader mission of fostering peace and justice through a supportive and sustainable organizational environment.

1.2.1 Mental health policy

In Nepal, the Constitution guarantees the right to health, including mental health (https://www.lawcommission.gov.np, n.d.). The National Mental Health Policy ensures that mental health is recognized as an essential part of overall wellbeing (Government of Nepal, 1996/2053BS (revised draft 2017))

The Disability Act also includes mental health concerns, ensuring people have the right to care, dignity, and protection (Rights of Persons with Disabilities Act, 2017, 2017).

In addition, the Labour Act 2017 addresses the wellbeing of workers by ensuring reasonable working hours, leave provisions, workplace safety, and protection from harassment or unsafe conditions (Nepal, 2017).

These legal frameworks show that Nepal values the mental and emotional wellbeing of workers at a national level.

At the organizational level, Nagarik Aawaz (NA) does not have a separate written mental health policy, but its safeguarding policy and organizational values (everyday peace, care, safe space, listening to unheard voices, trust and relationship building) focus strongly on the wellbeing of all staff. These values are not limited to the individual and communities but are applied to everyone in the organization as well. NA practices this by organizing retreats, reviews-reflections, and team-building activities at regular intervals, creating space for the team to recharge and connect.

NA also has practical systems to support the team's wellbeing. Review and reflection sessions allow the team to express challenges and find solutions together. Cross-learning sessions create collective problem-solving methods and ensure workloads are shared rather than carried by one person. Confidentiality is respected, but there is also an environment where team members can share issues when they need help. Supervision is another key approach that NA uses to support the team in managing the pressures of emotionally demanding work.

While following Nepal's laws, including Labour Act provisions on working hours, leave, and workplace protection, NA also aligns with the government policies. The organization integrates legal compliance with its peacebuilding values, ensuring the respondents are not only legally protected but also emotionally supported. Performance appraisals, team

meetings, and clear work boundaries help prevent overload. Organization strategic planning also considers the respondents capacity and wellbeing as part of its long-term sustainability.

In this way, while the national policies create a legal foundation for the respondent's wellbeing, Nagarik Aawaz puts these principles into practice through its values, systems, and daily organizational culture.

1.3 Research Problem

The respondents who delivered the program constantly heard very intense, emotionally overloaded narratives from survivors of gross violations of their rights during Nepal's armed conflict. Constant exposure combined with high workload and limited resources placed them at significant risk of getting burned out, hence leading to emotional exhaustion, reduced motivation, and reduced work effectiveness.

In the cultural and organizational environment of Nepal, additional barriers prevail toward the prevention of burnout. Stigma related to mental health, cultural taboos against articulating emotional pain, and the paucity of support systems within the workplaces, all these factors discourage workers from seeking assistance. Such barriers ensure that pressure continues to mount over time thereby weakening resilience as well as professional sustainability.

It is in addressing the burnout of the program team that the quality of psychosocial care to survivors can be sustained, and long-term effectiveness of post-conflict recovery programs achieved. Strengthened organizational support and culturally appropriate burnout prevention strategies will safeguard the well-being of the team but more importantly uplift their capacity to serve conflict-affected communities.

1.4 Research Questions

1. What major factors are contributing to burnout among the program team, especially among the psychosocial counselors working with CRSV survivors?

2. How far have the existing support measures (supervision, reflection sessions, and training as planned) gone toward mitigating stress and averting burnout?
3. How does improved support, such as peer sharing, counseling, and workload adjustments, affect the mental health and motivation of the team over time?

1.5 Research Objective:

This research aims to understand what is causing burnout among the program team and explore what can help reduce it. First, the study will identify the main stressors affecting the team. Then, it will try out a few practical strategies, such as a stress-management workshop and peer support sessions, to see how helpful they are. The team will share their views on these strategies, and their well-being will be measured before and after the interventions using a stress assessment tool and personal reflections. The overall goal is to find approaches that can be built into long-term support systems within NA and its partner organizations.

1.6 Research Goal

My research aims to understand what causes burnout among people who support survivors of conflict-related sexual violence in Nepal, and to work with them to find practical ways to reduce it. By partnering with these team members, the study hopes to create supportive practices that strengthen their resilience, improve their emotional well-being, and reduce the impact of secondary trauma. The overall goal is to help build a healthier and more sensitive work environment where staff feel supported and able to continue their care work with confidence.

1.7 Systems Thinking

Within the context of action research about preventing burnout of the program team at Nagarik Aawaz, systems thinking can be defined as a holistic approach used for understanding and solving problems. Systems thinking will, therefore, make it more explicit regarding the challenges faced by program team members and their interactions with different levels inside the organization. Basically, my research problem is about why there is a high tendency for counselors to burn out while they are providing counseling to victims during Nepal's armed conflict.

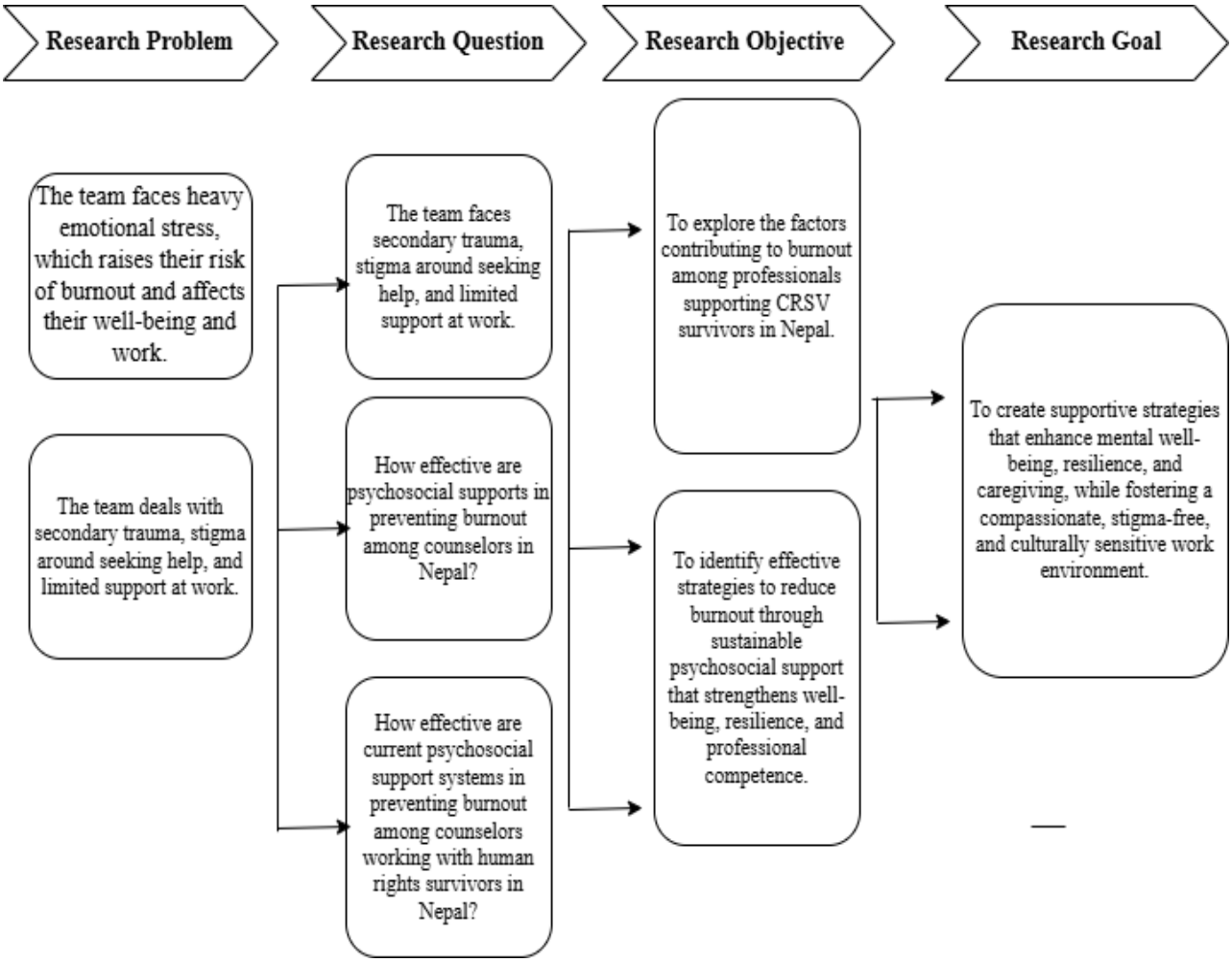
In the context of the action research on preventing burnout among the program team at Nagarik Aawaz, systems thinking provides a holistic approach to understanding and addressing the challenges faced by the team. The research problem revolves around the high incidence of burnout among the counselors working with survivors of gross human rights violations during Nepal's armed conflict. As a senior psychosocial counselor, my role involves supervising counselors in five districts. The research aims to prevent burnout and improve the well-being of these counselors by identifying the root causes and implementing sustainable solutions.

The systems thinking approach connects various components of the program. The research questions focus on identifying factors contributing to counselor burnout, understanding the emotional and psychological impacts of their work, and exploring ways to mitigate these effects. The research objectives are to enhance counselor well-being, prevent burnout, and improve the overall effectiveness of the program. These objectives align with the broader goal of ensuring that the team can continue their crucial work with conflict-affected populations while maintaining their mental health.

In mapping out the system, we see a cyclical relationship between the emotional strain of working with survivors, the risk of burnout, and the support structures available to the counselors. The research hypothesis suggests that burnout prevention is closely linked to improving supervision, providing peer support, and offering mental health resources. These elements need to be viewed as interconnected rather than isolated. The feedback loops within the system, such as how counselor burnout impacts the quality of care provided to survivors, further highlight the importance of addressing these issues in a comprehensive manner.

By using systems thinking, this research aims to create a sustainable framework that links counselor well-being to the overall success of the program, ensuring that it can continue to address human rights violations effectively

System Thinking



1.8 Operational Definition

Gross Human Rights Violations: Acts that severely infringe upon individuals' fundamental rights and freedoms during Nepal's armed conflict, including torture, enforced disappearances, and conflict-related sexual violence (CRSV).

Team Addressing Gross Human Rights Violations: Program Coordinator, Psychosocial counselors, and other professionals engaged in providing direct support, advocacy, and care for survivors of human rights abuses, particularly CRSV survivors, during and after Nepal's armed conflict.

Traumatic Narratives: Personal stories or accounts shared by survivors involving experiences of violence, abuse, or severe trauma, particularly related to CRSV, which can evoke distress in those hearing or processing them.

Burnout: A psychological condition characterized by emotional exhaustion, depersonalization, and reduced personal accomplishment resulting from prolonged occupational stress in caregiving roles, leading to decreased job performance and compromised well-being (Channawar, 2023).

Secondary Trauma: Indirect trauma experienced by professionals due to empathetic engagement with survivors' traumatic experiences, manifesting through emotional, cognitive, and physical symptoms similar to post-traumatic stress disorder (PTSD).

Resilience: The ability of the team to recover, adapt, and thrive despite continuous exposure to emotionally demanding situations through coping mechanisms, professional support, and self-care practices.

CHAPTER TWO

THEORETICAL BACKGROUND

2.1 Theoretical Background

To understand the challenges of burnout, it is important to look at a theoretical framework that explains the experiences of people working in conflict-affected areas. This framework helps clarify concepts like burnout, trauma, and the emotional impact of working with survivors of conflict-related sexual violence (CRSV), while also identifying factors that can help prevent burnout in the team.

2.1.1 Burnout Theory

Burnout is a phenomenon, particularly in professions where individuals are exposed to high levels of emotional strain (Maslach C. , 2016). It is a psychological response to prolonged stress, often characterized by three key dimensions: emotional exhaustion, depersonalization, and a reduced sense of personal accomplishment (Maslach C. , 2016). These symptoms are especially prevalent among the team working with survivors of conflict, as they are constantly exposed to traumatic narratives that drain their emotional resources.

Burnout theory, developed by Christina Maslach, explains how people can feel emotionally drained when they cannot recharge in stressful environments. This exhaustion stems from the overwhelming nature of the work, leading to fatigue and feelings of being emotionally "empty." Depersonalization occurs as a coping mechanism, where individuals distance themselves from their work and clients, often developing negative or cynical attitudes toward their roles or the people they serve (Maslach C. , 2016). This emotional detachment serves as a defense mechanism to protect counselors from the constant emotional toll of their work, but it can also lead to a breakdown in empathy and affect the quality of care provided. The third aspect of burnout, a lack of personal accomplishment, arises when professionals feel that

their efforts are ineffective or insufficient in making a meaningful difference. This often leads to a decline in motivation and a diminished sense of professional competence.

Likewise, Figley's Compassion Fatigue Theory is particularly relevant in understanding the emotional strain experienced by counselors and human rights workers engaged with survivors of conflict. Compassion fatigue refers to the emotional burden that arises from deep empathy for individuals who have experienced trauma (Figley, 2013). Unlike burnout, which is generally caused by prolonged work-related stress, compassion fatigue is directly linked to secondary exposure to trauma. This means that counselors working with survivors may feel overwhelmed, helpless, or personally affected by the trauma they are exposed to. Research suggests that compassion fatigue can mirror symptoms of burnout, such as diminished energy, detachment, and emotional distress, ultimately affecting the quality of care provided (R.Figley, 2013).

Furthermore, research indicates that professionals working in conflict zones or with vulnerable populations, such as refugees, war survivors, and individuals affected by human rights violations, are at particularly high risk of burnout (Pross, 2006). The distressing nature of the stories they hear daily can have a profound impact on their mental well-being, leading to emotional exhaustion and a sense of helplessness. This highlights the need for strong support systems and interventions to prevent burnout in these challenging work environments.

Understanding these challenges is crucial in developing strategies to reduce burnout, enhance resilience, and support those working in conflict-related human rights issues. By implementing proper self-care practices, supervision, and peer support, professionals can mitigate the impact of burnout and continue their essential work effectively.

2.1.2 Secondary Traumatic Stress

According to Figley (Figley, 2013), secondary traumatic stress (STS) can develop when individuals are exposed to the suffering of others, particularly in professions that involve providing emotional support to trauma survivors. Team members who regularly listen to distressing stories may absorb the emotional burden of those they help, leading to symptoms similar to post-traumatic stress disorder (PTSD). These symptoms can include anxiety, difficulty sleeping, and emotional numbness, affecting their ability to work effectively.

Likewise, Bride et al. (Bride, 2007)emphasize that professionals working with trauma survivors are at high risk of experiencing STS due to continuous exposure to painful narratives. Without proper self-care and organizational support, they may face burnout, emotional fatigue, and a decline in their overall well-being.

According to Baird and Kracen (Baird, 2006), understanding STS is essential for developing prevention and intervention strategies. Providing mental health resources, peer support, and training on self-care can help reduce the negative impact of STS. Creating a supportive work environment ensures that team members can continue their work in post-conflict recovery and human rights advocacy without compromising their own well-being.

By acknowledging the effects of STS and implementing protective measures, organizations can support their teams in remaining resilient and effective in their roles.

2.1.3 Gestalt Therapy

Gestalt therapy, developed by Fritz Perls, aligns with these perspectives by emphasizing awareness, self-responsibility, and holistic well-being (Perls, 1951). In the context of burnout prevention, Gestalt therapy encourages individuals to recognize their emotions, thoughts, and physical sensations as interconnected experiences. According to Taylor (Taylor J. , 2019), this approach is particularly useful for professionals in high-stress fields, as it promotes

mindfulness and self-regulation. By fostering awareness of personal needs and stress responses, Gestalt therapy empowers individuals to take proactive steps in maintaining their well-being.

Additionally, self-care theories suggest that maintaining a balance between professional and personal life is crucial for preventing burnout. Self-care involves deliberate actions to sustain physical, emotional, and mental health (VandenBos, 2018). This perspective aligns with organizational well-being models that emphasize the role of workplace culture in supporting employees' mental health (Demerouti, 2017). When program teams operate in an environment that prioritizes self-care and peer support, they are more likely to sustain their emotional well-being and professional effectiveness.

By integrating these theories, the theoretical framework not only illuminates the causes and consequences of burnout in high-stress settings but also informs practical solutions and strategies to prevent burnout among the program team. The framework provides a comprehensive approach that connects individual psychological processes with broader organizational and societal factors, offering insight into both the immediate and long-term well-being of the counselors. This connection between theory and practice enhances the explanatory power of the research and lays the foundation for interventions that support counselors in their vital work with survivors of human rights violations.

2.1.4 Conflict Transformative Theory

Working with survivors of Nepal's armed conflict can be emotionally overwhelming for program teams. Many team members face stress and emotional fatigue, which can eventually lead to burnout. One helpful way to understand and deal with this is through Conflict Transformative Theory, as explained by Isabel Bramsen and Poul Poder in their book Emotional Dynamics in Conflict and Conflict Transformation (Poder, 2018).

Bramsen and Poder say that conflict is not just about disagreements or political problems, it also deeply affects people's emotions and relationships. To really transform a conflict, we need to work through these emotional and relational aspects, not just focus on policies or structures.

This is especially relevant for teams working with people who have experienced trauma. These respondents often feel emotions like fear, helplessness, sadness, or even guilt and betrayal. Over time, being exposed to such suffering without a chance to process their own feelings can lead to emotional exhaustion, compassion fatigue, or burnout.

One key idea is emotional reflexivity, this means being aware of your own emotional experiences and reflecting on them (Poder, 2018). For program teams, this can look like creating time and space to talk about emotions, having supportive supervision, or peer discussions. These practices help prevent burnout by allowing team members to manage their emotional load and stay connected to the purpose of their work.

Bramsen and Poder also remind us that transformation is not a quick fix. It is a slow, ongoing process that involves trust, care, and empathy. Preventing burnout is also a long-term journey that needs constant attention and collective effort. When teams build emotional safety and strong relationships, they not only take care of themselves, they also support broader healing and social change.

CHAPTER THREE

RESEARCH METHODOLOGY

3.1 Research Methodology

For this study, I used Participatory Action Research (PAR) as the research approach. PAR was a collaborative method where both the researcher and the respondents worked together throughout the study. The program team was involved in all steps, from identifying burnout issues to creating and testing solutions. This approach helped empower the team, allowing them to reflect on their experiences, share their thoughts, and develop strategies to reduce burnout.

The research was mixed, using both quantitative and qualitative methods. It focused on gathering personal stories and insights from the team, which allowed the respondents to express their experiences, emotions, and struggles. This approach helped uncover underlying stressors, workload concerns, and emotional exhaustion that contributed to burnout. By sharing their perspectives, the respondents highlighted specific triggers, patterns, and the impact of workplace conditions on their well-being. This supported the development of more targeted and effective interventions to prevent burnout.

I used interviews, group discussions, and feedback sessions to understand the challenges they faced, the stress they experienced, and how they could improve their well-being. These methods also helped the team openly share their experiences and come up with solutions together. By gathering this information, I was able to refine the strategies to make sure they were effective and relevant.

The PAR process was cyclical, repeating in cycles of planning, action, and reflection (Walker, 1993). This allowed the team to continuously learn and adjust their strategies. By using this approach, the team felt more in control of their own well-being and became better

equipped to deal with the emotional challenges of their work. Through this collaborative and reflective process, the team created long-lasting changes that strengthened their emotional resilience and job satisfaction while working on human rights issues in Nepal.

3.2 Research Design

I collected data using tools such as the stress inventory, interviews, and focus groups. These methods helped me measure burnout, emotional health, and how well the stress-reduction strategies were working. The research followed a cyclical process of reflection, planning, action, and evaluation.

I carried out three cycles of data collection and intervention. The first cycle focused on understanding the level of burnout and identifying the main stressors for the team. In the second cycle, I introduced stress-relief strategies and gathered feedback from the respondents. The final cycle assessed how effective the strategies were and made improvements where needed.

Each cycle lasted 8 weeks, and the entire research covered 24 weeks. This approach ensured that the interventions were continually improved with the aim of creating long-term support systems for the respondents.

3.3 Research Site Selection

This research focused on the Lumbini and Sudur-Paschim Provinces of Nepal, specifically in the districts of Dang, Rukum, Rolpa, Kailali, and Kanchanpur. These areas were heavily affected by Nepal's armed conflict and continued to face long-term challenges, especially related to conflict-related sexual violence. Nagarik Aawaz had been working in these districts for many years, building strong connections with the communities. This made it easier to study the impact of CRSV on survivors and understand how well the available support programs were working.

By focusing on these districts, the research explored the struggles faced by the program team who supported CRSV survivors, particularly the emotional burden they carried. Since mental health resources were limited in rural Nepal and trauma was often stigmatized, counselors working in these areas faced unique challenges. Studying their experiences helped improve support systems for both survivors and counselors. The findings also guided future programs so they could be more relevant and effective in addressing the psychological needs of those affected by conflict.

3.4 Research Sample Selection

To ensure the right respondents were selected for this research, they were grouped based on their roles, responsibilities, and workplaces. The study included coordinators, counselors, and documentation officers who were actively working with survivors of conflict-related sexual violence (CRSV) in the districts of Dang, Rukum, Rolpa, Kailali, and Kanchanpur. A total of 20 respondents were selected.

Each group contributed different insights to the research. Coordinators shared their experiences in managing programs and supporting survivors, while counselors discussed their role in providing psychological care. Documentation officers explained how information was recorded and reported, offering a different perspective on CRSV support. To make sure the respondents could provide valuable input, they were required to have at least six months of experience in their respective roles.

To organize the information effectively, a structured table was created to categorize the respondents by their roles, experience levels, and locations. This helped analyze their challenges and needs more clearly. By including diverse perspectives while focusing on those directly involved in CRSV support, the study aimed to gather important information that could help improve future support programs and interventions.

The table below shows the demographics of the research the respondents, such as the district, their roles, and number of the respondents per district.

S.N	District	Role	No. of the respondents
1	Dang	Coordinator	1
		Psychosocial Counselors	2
		Documentation Officer	1
2	Rolpa	Coordinator	1
		Psychosocial Counselors	3
3	Rukum	Coordinator	1
		Psychosocial Counselors	3
4	Kanchanpur	Coordinator	1
		Psychosocial Counselors	2
		Documentation Officer	1
5	Kailali	Coordinator	1
		Psychosocial Counselors	2
		Focal Person	1
6	Both Provinces	Organization Focal Persons	2
7	Nagarik Aawaz	Program Manager/Senior Program Officer	2
Total			**24**

3.5 Nature and Sources of the Data

The primary source of information for this research will come from direct conversations and interactions with members of the program team. To collect the necessary data, I will be using a combination of two different research methods: qualitative and quantitative.

- Quantitative methodology: These include using a stress inventory, which is a tool designed to measure the level of stress experienced by individuals.

- Qualitative methodology: This involves conducting interviews, focus group discussions (FGDs), and gathering feedback from the respondents to gain deeper insights into their experiences.

Since the main objective of this study is to understand the emotions, thoughts, and personal experiences of the respondents, I will conduct semi-structured interviews that allow flexible conversations. These interviews will be designed to encourage open sharing. Additionally, open-ended discussions will be held, where the respondents can freely express their views without any limitations. Observing the respondents in their natural work environment will also be an essential part of this process, as it will help me understand their daily challenges and interactions in a more meaningful way.

To ensure that important reflections, observations, and insight, I will maintain a research journal throughout the study. This journal will serve as a personal record where I will document key findings, thoughts, and reflections that emerge during the research process.

The purpose of collecting all this information is to identify common patterns and measure key aspects related to both personal experiences and the overall impact at the program level.

The research will follow a participatory action research approach, which means it will be interactive, flexible, and closely connected to the real-life experiences of the respondents. Instead of collecting data for academic purposes, this approach ensures that the research actively contributes to improving support systems for families affected by conflict. The ultimate goal is not only to gain knowledge but also to create meaningful change that benefits the respondents and their communities in a tangible way.

3.6 Tools of Data Collection:

The tools of data collection are essential for obtaining accurate and comprehensive information from various sources, providing a complete understanding of an area of interest.

(Rea, 2014). For this research, I used several data collection tools such as case studies, focus group discussion, participant observation, and survey questionnaires. These tools were used to obtain data from the diverse group of research the respondents in relation to their personal and programmatic aspects on burnout.

3.7 Data Analysis Process

I analyzed the data using a participatory approach, meaning that team members from Nagarik Aawaz in Dang, Rukum, Rolpa, Kailali, and Kanchanpur will be actively involved. This helped to ensure that the findings are meaningful and useful for our work.

The analysis began with a review of reflective journals, notes from supervision sessions, and discussions from focus groups. Instead of being a one-time process, data analysis happened continuously throughout the research. It followed a cycle of planning, taking action, and reflecting on what we learn.

Since this is a qualitative study, we used methods such as active participation, deep observation, discussions, and reflection. These techniques allowed us to gain a deeper understanding of the experiences and perspectives of the people involved in the study.

3.8 Action Research Cycle

The research was conducted in three cycles and was summarized as follow.

3.8.1 Research Cycle 1: Understanding Burnout and Its Root Causes

Purpose: The goal explore the emotional and psychological challenges of the program team. I focused on identifying key stress factors. This phase also involved listening to the team's experiences to see what supports or hinders their well-being.

Planning: I first read related books to understand the topic. Then I held a planning meeting with my NA team to design the research activities together. I shared the FGD questionnaire

for review, and their feedback helped refine it. After making changes, I coordinated with partner organizations. At the same time, I began developing a Vicarious Trauma Informed Training based on FGD insights. This planning stage built shared ownership and set the foundation for supportive action.

Action: I conducted focus group discussions with three small groups of staff, including counselors, coordinators, and documentation officers, to understand their experiences and challenges. The discussions created a safe space for them to share how their work with survivors affected them emotionally and what support they needed. Insights from these discussions showed many were struggling with the emotional burden of their work. In response, I organized a vicarious trauma training to help them recognize and manage these stresses and learn coping strategies. The training fostered peer support, self-care practices, and a shared understanding that strengthened team well-being.

Reflection: The FGDs and VT training revealed that respondents struggled emotionally, often feeling exhausted and overwhelmed by survivors' stories. Many found it hard to separate their own feelings from the trauma they were witnessing, and organizational support was limited. These experiences reflected burnout, compassion fatigue, and secondary traumatic stress, showing how closely caregivers can absorb survivors' pain. Reflection sessions helped participants become more aware of their emotions and feel supported, which was therapeutic. Overall, sharing and supporting each other began to shift the team toward connection, care, and a healthier work culture. This cycle was conducted from March to April, 2025.

3.8.2 Research Cycle 2: Implementing and Testing Stress-Reduction Strategies

Purpose: Implement and assess strategies to reduce burnout and enhance resilience.

Planning: After the FGD and vicarious trauma training, I shared my reflections with the Nagarik Aawaz team. We agreed on creating more spaces for reflection and emotional support. We plan to visit each district to provide a safe space for personal well-being. We also discussed simple stress relief techniques like breathing exercises, mindfulness, and creative activities. These plans are based on both my observations and the team's suggestions to keep them practical and relevant.

Action: We started implementing the activities. In each district, we held mindfulness sessions to help the team relax and notice their emotions. Team-building exercises were done to build trust and connection. Individual counseling was available for those who wanted private support. These efforts focused on reducing stress and fostering care within the team.

Reflection: After the mindfulness sessions, team-building activities, and counseling, I collected feedback from the team. Many said these activities helped them pause, feel supported, and manage stress. I noticed improvements in communication, mood, and emotional balance, though it was still early for full change. The sessions helped address emotional exhaustion and secondary trauma while building awareness and self-care. Going forward, I plan to strengthen these strategies and make them a regular part of the team's routine. This cycle 2 was conducted from May to June, 2025.

3.8.3 Research Cycle 3: Refining Strategies and Institutionalizing Support Systems

Purpose: Create sustainable support structures for long-term burnout prevention and ensure that the team's well-being becomes a formal part of organizational practice.

Planning: After Cycle 2, NA team reviewed earlier strategies like mindfulness, team-building, peer support, and counseling. We spoke with staff in Dang, Rukum, Rolpa, Kailali, and Kanchanpur to see what worked, what needed improvement, and what barriers existed. We focused on practical, effective strategies that could continue long term. We planned

support systems like regular check-ins, peer support, and mental health resources. Feedback was updated to track participation, well-being, and stress, involving participants at both individual and group levels.

Action: After finalizing the plan, we set up mental health and well-being resources. Peer support groups were created with rotating facilitators so everyone could participate. Counseling sessions were scheduled in-person and online for easy access. Workload strategies were adjusted with flexible tasks, breaks, and shared responsibility. Wellness activities like mindfulness and creative exercises were added. Documentation systems tracked participation, stress trends, and those needing extra support.

Reflection: After implementing these strategies, we collected feedback through group intervention. Respondents felt more supported, connected, and emotionally resilient. Mindfulness, peer support, and workload management reduced exhaustion and increased a sense of accomplishment. Regular reflection and supportive spaces helped manage secondary trauma. Overall, the interventions strengthened trust, empathy, and emotional safety within the team. Cycle three was conducted from July to August, 2025

Table: Action Research Cycle Detail Plan

Research Cycle	**Activities**	**Starting date**	**Ending date**
Cycle 1 Understanding Burnout and Its Root Causes	• Literature Review • Review the Questionnaire on stress level • Focus Group Discussion with the program team • Workshop and training on vicarious Trauma	March	April

Cycle 2 Implementing and Testing Stress-Reduction Strategies	• Identify and Design Stress-Reduction strategies based from the findings of the earlier cycle • Stress-Management Workshops	May	June
Cycle 3 Refining Strategies and Institutionalizing Support Systems	• Key Informant Interview • Presentation of findings and validation with the research respondents	July	August

3.9 Significance of the Study

This study is important to me both personally and professionally. As a senior psychosocial counselor at Nagarik Aawaz, I have seen how emotionally and mentally exhausting it can be for frontline people working in conflict-related issues. Preventing burnout is crucial not only for their well-being but also for keeping our programs effective in places like Dang, Rukum, Rolpa, Kailali, and Kanchanpur. When our team is mentally strong, they can continue providing the best support to survivors of human rights violations.

The findings of this research will help many people. Program team members will learn practical ways to manage stress, build resilience, and find more satisfaction in their work, which will improve the quality of support given to survivors. Similarly, other organizations working in similar issue can also use these strategies to take better care of their staff. This research will add to the knowledge in psychosocial counseling and conflict transformation, showing how action research can solve real problems in difficult environments. It also aligns with Nagarik Aawaz's mission of promoting peace and social justice by ensuring that those working for justice and reconciliation stay strong and motivated.

3.10 Limitations of the Study

This study has some limitations that could affect how its findings are understood and used. It focuses on five districts-Dang, Rukum, Rolpa, Kailali, and Kanchanpur, where Nagarik

Aawaz runs its program. Because of this, the results might not apply to other regions of Nepal with different social and political contexts. The findings are also specific to how Nagarik Aawaz operates, meaning they might not work the same way for other organizations. Since the study involves direct interaction with the respondents, they might hesitate to share negative experiences due to job security concerns. The research was done within a set timeframe, which may have limited deeper exploration or long-term observations. Additionally, the participatory approach means the research team's perspectives could influence data interpretation. Despite these challenges, the study seeks to offer useful insights into preventing burnout among teams working in conflict-affected areas, benefiting both research and real-world psychosocial support practices.

3.11 Ethical Consideration

When working with people who are going through difficult emotions, it is important to be respectful, sensitive, and keep their information private. This research will ensure that the respondents fully understand the study before they agree to take part, and they can leave at any time without any consequences. Their personal details will be kept confidential, and their responses will not be linked to their names. Since the topics may be sensitive, counseling support will be available, and the respondents can take breaks if needed. As a senior psychosocial counselor, special care will be taken to make sure the respondents feel comfortable and free to share their experiences. The research process will be transparent, and findings will be shared with the respondents and relevant groups, following ethical guidelines.

This study may face some challenges, such as a small number of the respondents, limited information on burnout prevention in Nepal, and possible biases in responses. Reaching team members in remote areas may also be difficult, and differences in culture or language could affect the research. There may also be limited resources to conduct the study. However, by

carefully addressing these challenges, the research will ensure ethical practices, prioritize the well-being of the respondents, and contribute to better psychosocial support and conflict transformation efforts.

CHAPTER FOUR

DESCRIPTION OF THE RESEARCH

Cycle 1: Understanding Burnout and Its Root Causes

To begin this cycle process, I organized a planning meeting with my NA team where we worked together to design the research activities in a way that felt collaborative and inclusive. During this meeting, I also shared the questionnaire for the Focus Group Discussions (FGDs) so that everyone could review it and give their suggestions. Their feedback was very helpful because it allowed me to refine my approach and make sure the discussions would take place in a safe and supportive environment where the respondents felt comfortable to openly share their emotional struggles. After making the necessary changes, I reached out to our partner organizations to coordinate the FGDs and ensure that the respondents were prepared and informed in advance. In addition to this, I also started preparing a Vicarious Trauma Informed Training, which was directly shaped by the insights and findings that emerged from the FGDs. This training was planned to respond to the real needs of the team and provide them with practical tools to better understand and cope with the impact of working with survivors of gross human rights violations. Overall, this stage of planning was important because it brought everyone together in the process, encouraged shared ownership, and laid the foundation for meaningful and supportive action.

Focus Group Discussion: I conducted focus group discussions (FGDs) with three small groups of the respondents to better understand their experiences and perspectives. Two of the groups had six members each, and the third group had eight members. Altogether, these groups included psychosocial counselors, coordinators, and documentation officers who are directly involved in working with survivors of gross human rights violations. The aim of bringing together was to create a safe space where they could share their thoughts, challenges, and coping strategies openly. Each respondent was encouraged to speak about

their daily work, the emotional impact it had on them, and the kinds of support they felt they needed. The group discussions not only provided a chance for individuals to reflect on their personal experiences but also allowed them to listen to one another and realize that many of the difficulties they faced were shared. This helped to bring out a collective understanding of the situation and highlighted both the strengths of the team and the areas where more support was required. By engaging with counselors, coordinators, and documentation officers together, I was able to gather a wide range of insights that would have been difficult to capture through individual interviews alone.

Vicarious Trauma Training: In response to the findings from the focus group discussion, I decided to organize a training that specifically focused on recognizing and managing vicarious trauma, because it became clear that many respondents were struggling with the emotional burden of listening to and supporting survivors of gross human rights violations. During the FGD, the respondents shared that even though they were committed to their work, they often carried the pain and suffering of survivors with them, which left them feeling exhausted, overwhelmed, and at times helpless. With this in mind, the training was designed to give them both knowledge and practical tools to better understand what vicarious trauma is, how it shows up in their daily lives, and what steps they can take to care for themselves while continuing to support others. The sessions included simple activities that helped the respondents notice how stress and trauma affect the body and mind, as well as discussions where they could openly share their experiences without judgment. By learning how to recognize the signs of vicarious trauma early, the respondent could start developing healthier coping strategies, such as grounding techniques, relaxation exercises, and peer support practices. The training also emphasized the importance of boundaries, self-reflection, and regular self-care routines, reminding the team that their well-being is just as important as the survivors they are supporting. Many respondents said "*they felt a sense of relief just by*

naming their struggles and realizing they were not alone in facing these challenges". This collective acknowledgment created a stronger sense of unity within the team and helped build trust that they could lean on one another for support.

The respondent also described moments when they felt drained of energy, losing motivation and questioning whether their work was making any real difference, which reflected the sense of reduced accomplishment. One example that stood out was the story of a counselor who was also a mother "*She shared that she could not help but deeply connect her own life with the story of a survivor she was supporting. She felt very connected to the survivor, which made it hard to separate her work from her personal feelings, leaving her overwhelmed and emotionally drained".* This example shows how difficult it can be for people working in such sensitive contexts to maintain clear boundaries, and how the lack of proper organizational support can make them more vulnerable to burnout and emotional fatigue.

Overall, the training was not only about building individual skills but also about creating a culture in the organization where emotional well-being is valued, protected, and prioritized as an essential part of working with trauma.

Cycle 2: Implementing and Testing Stress-Reduction Strategies

After finishing the FGD and vicarious trauma training, I sat with my team at NA to share my experiences and main reflections. I also talked about the KII with the focal persons in both provinces. During our discussion, we agreed that it would be helpful to create more spaces for reflection and emotional support. We planned to visit the team in each district so that everyone would have an open and safe space to reflect on their personal well-being. We also discussed introducing stress relief techniques, such as breathing exercises, short mindfulness practices, and creative expression activities that the respondents could easily use in their daily

routine. These plans were shaped based on both my observations and the team's own suggestions, ensuring the strategies were practical and relevant.

We then began implementing the activities. In each district, we organized mindfulness sessions where the team could pause, relax, and become aware of their emotions. We conducted team-building activities to strengthen trust, connection, and collaboration among members. Individual counseling support was offered to anyone who wanted to talk in a more private setting about their stress, challenges, or personal experiences.

After carrying out the mindfulness sessions, team-building activities, and individual counseling, I collected feedback from the respondents about their experiences. Many shared that these activities gave them a much-needed space to pause, feel supported, and be understood by their peers. Some mentioned that the mindfulness techniques were simple but surprisingly effective, helping them to manage stress during their busy workdays.

When I compared these responses with the stress and burnout signs I had noticed earlier, I saw some positive changes. It was still too early to expect a complete shift, but there were clear signs of improvement, respondents seemed more open in their communication, there was a lighter mood during meetings, and some even shared that they felt emotionally more balanced.

The respondent often feels the emotional burden of the stories they hear because they work closely with survivors of CRSV. Mindfulness and supportive group activities acted as a "release valve," helping them process this secondary trauma before it built up into compassion fatigue.

The open discussions during the sessions strengthened relationships within the team and created emotional safety. This shift in group dynamics, from isolation to mutual support,

showed that transformation is not just about reducing stress but also about building a workplace culture where trust, empathy, and emotional care are valued.

Cycle 3: Refining Strategies and Institutionalizing Support Systems

After reflecting on Cycle 2 and the feedback we received, the NA team reviewed how well earlier strategies worked, such as mindfulness sessions, team-building activities, peer support, and individual counseling. We talked with the team in Dang, Rukum, Rolpa, Kailali, and Kanchanpur to learn what was helpful, what could be improved, and what challenges made regular participation difficult.

From this, we focused on strategies that were practical, effective, and possible to continue long term. We also planned institutional support like regular check-ins, a clear peer-support system, and formal access to mental health resources. The feedback process was updated to track participation, emotional well-being, and stress on an ongoing basis. By including participants at both individual and group levels in every step, we made sure the systems matched their real experiences and needs.

Once the plan was finalized, we began formalizing mental health and well-being resources. Regular counseling sessions were scheduled, both in-person and virtually, so that the respondents could access support without disrupting their work. Workload management strategies were adjusted, such as flexible task distribution, scheduled breaks, and shared responsibility for high-intensity cases, to reduce chronic stress. Additionally, wellness activities like short mindfulness practices and creative expression exercises were integrated into weekly routines, making self-care a consistent part of work life rather than an optional add-on. Documentation systems were created to record participation, track trends in stress levels, and identify the respondents who may require additional support.

CHAPTER FIVE

FINDINGS AND DISCUSSION

This chapter explains what I found in my action research on preventing burnout among the program team who work with survivors of severe human rights violations in Nepal. I gathered information through focus group discussions, key informant interviews, stress-inventory reflections, and regular observation during all three research cycles.

After going through all the data, the findings fit into four main areas:

1. Challenges in working with survivors of gross human rights violations
2. Impact on the mental and emotional well-being of the respondents
3. Manifestations and signs of burnout
4. Existing coping mechanisms and desired support systems

Each of these areas is described in detail in the following sections. The discussion brings together the team's own experiences, relevant theories, and what emerged during the action research process.

1. Challenges in Working with Survivors of Gross Human Rights Violations

The team shared several challenges that continued to shape their work. Emotional pressure came up the most, but they also talked about difficult working conditions, community stigma, safety risks, and the struggle to maintain confidentiality. These issues were connected and affected how they carried out their roles every day. The respondents consistently shared that the most difficult aspects of their work revolve around maintaining confidentiality, ensuring survivor safety, and dealing with community stigma. These challenges are not just practical but also deeply emotional. Many cases of CRSV remain unrecognized by the government, and this lack of official acknowledgment creates ongoing uncertainty and frustration for both survivors and staff. One of the program coordinator explained, "*Even if we try, nothing will*

change. Nobody wants to take responsibility." This sense of hopelessness reflects as emotional exhaustion, where workers begin to feel that their efforts have little impact, even when they continue to give their best. (Maslach C. , 2016).

Confidentiality and safety were highlighted as pressing concerns. Respondents described situations where survivors risked being exposed, which could lead to exclusion, harassment, or even threats to their lives. One of the counselor recalled, "*In one case, she got threaten phone calls from the family of survivors as well as the leaders of the communities."* Stories like these shows how fragile safety can be in conflict-affected communities and how protecting survivors often places the respondents under immense stress. The fear of unintentional disclosure is constant, especially in cases where multiple survivors live within the same family or community. This aligns with the concept of compassion fatigue, where repeated exposure to trauma and responsibility for others safety gradually wears down caregiver's resilience. (Figley, 2013).

Community stigma further silences survivors and complicates the work of staff. In a society where reputation carries enormous weight, survivors often choose silence to avoid shame or family breakdown. As one the respondent put it, "*Some survivors say they want to speak, but only if their safety is guaranteed. They ask, 'If TRC is formed and I speak, how will you ensure my safety?*" The stigma not only discourages survivors but also makes respondents vulnerable to criticism. They are often questioned about their intentions, asked why they are meeting certain women, or accused of creating problems rather than supporting healing.

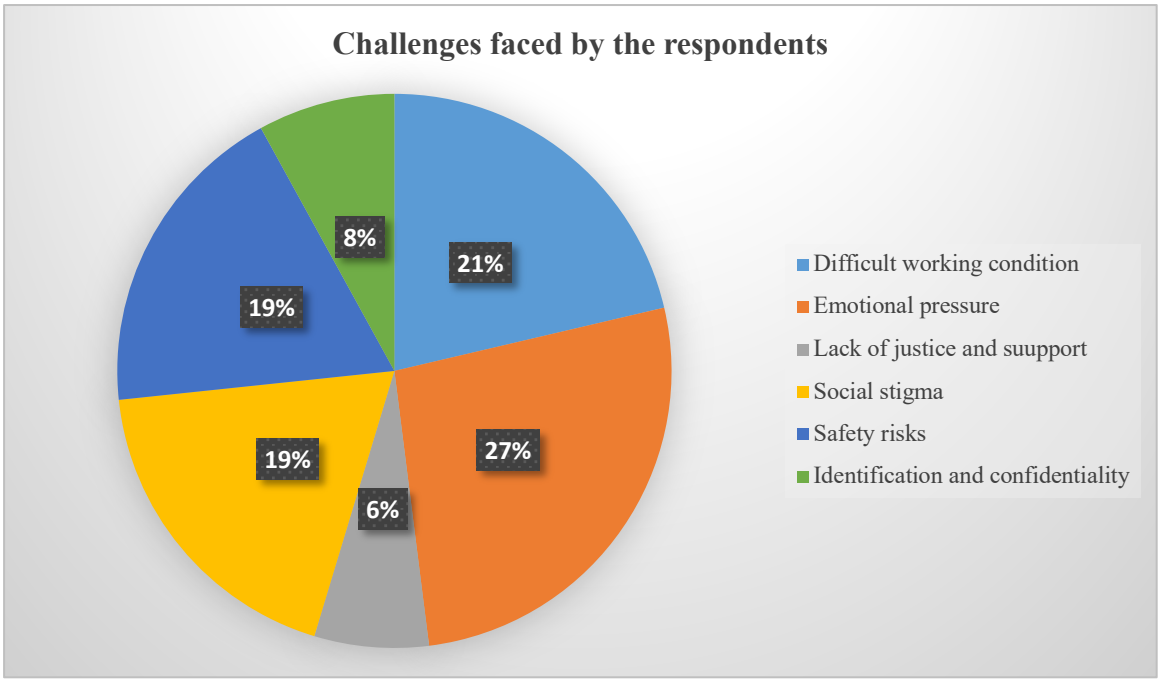
Political and institutional challenges add another layer of difficulty. Respondents described that local authorities frequently deny or downplay cases of sexual violence. One respondent shared, "When we try to register survivors, the authorities ask for detailed information but then say maybe the case is not real." Such statement is demoralizing for both survivors and

those supporting them. Structural neglect and political interference, as highlighted in the KII responses, mean that justice feels distant and uncertain. This reflects the argument that peacebuilding requires more than formal structures, it also depends on trust, recognition, and inclusivity at multiple levels. (Lederach, 1997).

Family and social pressures contemplate heavily on survivors. Many are afraid to disclose their experiences, fearing that it will destroy their families or subject them to further blame. Respondent described how survivors who are married or have children often feel trapped, with little room to seek justice or healing. This silence and suppression contribute not only to survivors' suffering but also to the stress of respondent who carry their unspoken pain.

These findings suggest that burnout among respondent is not only caused by the emotional weight of listening to survivors' traumatic stories but also by the structural, cultural, and political barriers they must navigate every day. The constant negotiation between survivor care, community expectations, and state neglect creates what Gestalt therapy calls "*unfinished business",* emotional burdens that remain unresolved and continue to surface in respondent own lives and relationships. As one psychosocial counselor put it, "*Sometimes it feels like the survivors' pain is pointed at us with a gun."* This powerful metaphor captures the intensity of secondary trauma and the urgent need for both self-care and systemic support.

Figure No 1: Challenges faced by the respondents



2. Emotional Impact

Listening to repeated story of violence has a cumulative effect on respondent, and the FGD made this very clear. Many respondents described how the stories they hear slowly settle into their own minds and bodies, creating symptoms of secondary trauma and emotional exhaustion. As one psychosocial counselor shared, "*Even small family matters make me emotional, sometimes I cry without reason."* This reflects idea of compassion fatigue, where helpers absorb the pain of those they support. Respondent also reported anger, irritability, and emotional outbursts in their homes, (Figley, 2013). One of the psychosocial counselor admitted, "*Sometimes I scold my child out of stress,*" showing how work-related trauma spills over into family life.

The feelings of being "*stuck*," hopeless, or overwhelmed were common, especially when survivors expressed despair about the slow and uncertain transitional justice process. Maslach's burnout theory helps explain this, prolonged exposure to emotional demands, combined with a lack of systemic progress, creates exhaustion, cynicism, and reduced sense

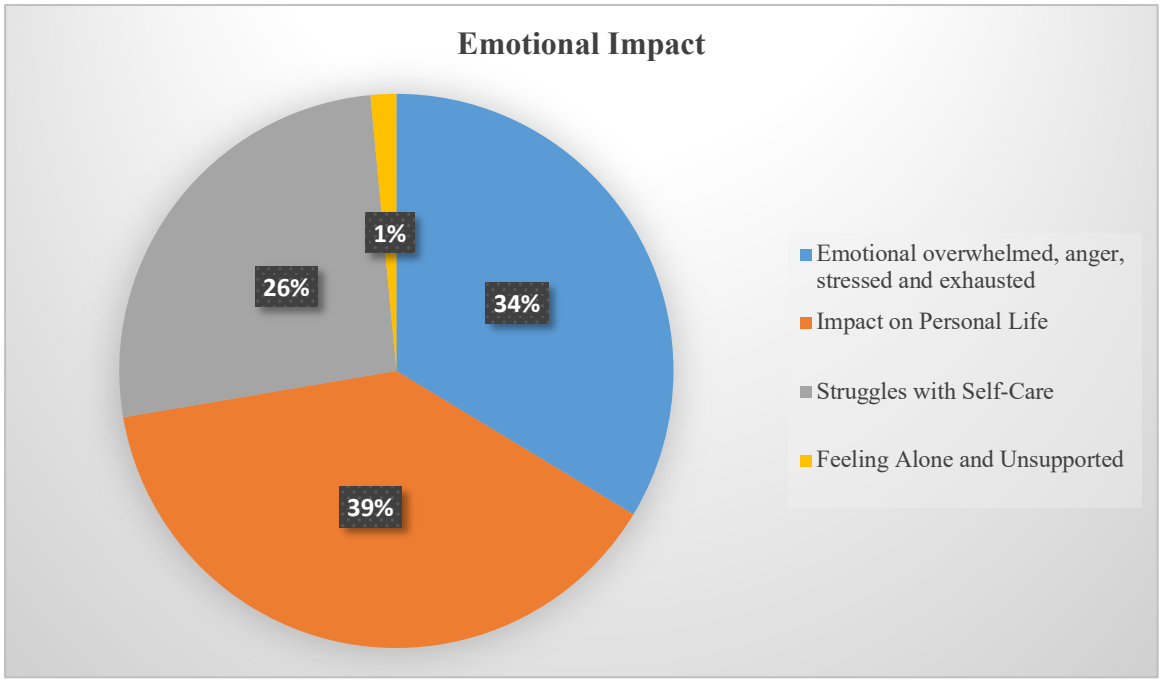
of accomplishment. Physical symptoms were also frequently mentioned, including headaches, stomach pain, trembling, and sleep disturbances. The psychosocial counselor said, "*I feel like my body trembles, and just remembering some stories gives me a headache."* These are clear signs of how trauma is embodied, a point also emphasized in Gestalt therapy, which stresses awareness of the body as a carrier of unprocessed emotion.

The KIIs confirmed these findings, showing that emotional fatigue is made worse by threats to personal safety and the heavy responsibilities respondent carry. Survivors' confidentiality is hard to maintain in small communities, and respondent sometimes face suspicion or even hostility from families and local leaders. This aligns with the Gestalt view that unresolved external pressures heighten internal stress, as workers are caught between survivors' needs, family expectations, and political structures (Perls, 1951).

Family and social pressures add another layer. Survivors often hesitate to disclose because they fear family breakdown or community judgment, and respondent are left carrying that silence. The psychosocial counselor reflected, "*I want to share my pain, but I don't know who will understand.*" This shows how stigma around both sexual violence and mental health isolates not only survivors but also those supporting them.

Taken together, the findings suggest that burnout is not caused only by listening to traumatic stories but also by navigating the structural and political barriers that surround survivors and respondent every day. In other words, emotional exhaustion is intertwined with systemic neglect. Without recognition and accountability from state mechanisms, respondent feel as if they are holding survivors' pain without any real outlet for justice.

Figure no. 2 Emotional Impact



3. Manifestations and Signs of Burnout

The findings of this cycle strongly align with Maslach's burnout framework (Maslach C. , 2016)which identifies emotional exhaustion, depersonalization, and reduced personal accomplishment as the three core dimensions of burnout. Respondent described clear experiences of emotional exhaustion. Many felt drained, hopeless, and unable to sustain their energy in the face of repeated exposure to survivors' trauma and the ongoing delays in the transitional justice process. They shared how they often carried this heaviness home, affecting their family relationships, sleep, and overall well-being. For some, the exhaustion was expressed through irritability, frequent headaches, or a sense of being emotionally "full" with no space to release.

Depersonalization was also evident. Some respondents admitted that, at times, they withdrew from colleagues or survivors, avoided answering phone calls, or pretended everything was fine while internally struggling with overwhelming emotions. They described becoming more easily irritated or even avoiding listening to their colleagues' stories, not because they lacked

compassion, but because they feared being burdened with more pain than they could carry. This distance, though unintentional, reflects the protective but isolating strategies the respondents sometimes use to survive emotionally demanding work.

Reduced personal accomplishment was another significant theme. Respondents often questioned whether their work truly made a difference, especially when the transitional justice process remained slow and uncertain. Survivors' frustrations and doubts about delayed reparations added to this burden. Respondents shared that they sometimes felt caught in the middle, trying to support survivors with limited resources while knowing that systemic justice was unlikely to come soon. One metaphor captured this frustration vibrantly, "*The fruit is ripe, but the crow hasn't come.*" This symbolized a deep sense of readiness for change and transformation, but also the endless waiting without progress, which leaves respondents in dividing line between hope and hopelessness.

Despite these challenges, respondents are not passive. They actively use both personal and collective coping strategies to manage stress. Individually, many turn to meditation, journaling, walking, listening to music, or spending time in religious spaces to release some of the emotional weight. Others find relief in small, everyday joys such as watching comedy shows or sports, drinking tea in peace, or taking short breaks to disconnect from their phones. These personal practices serve as moments of grounding in an otherwise heavy workload.

Peer support, counseling sessions, group intervention emerged as a critical protective factor. Sharing experiences with colleagues lightens the emotional load and helps respondents feel less isolated. Respondents emphasized how valuable it is to have someone who understands the unique stress of this work and can listen without judgment. This sense of solidarity, even in moments of frustration, sustains their motivation and sense of purpose.

Overall, the findings show that while the respondents remain committed to supporting survivors, they are navigating complex emotional landscapes marked by exhaustion, self-doubt, and systemic frustrations. At the same time, their creativity and resilience in finding coping strategies demonstrate both their strength and the urgent need for stronger, more consistent support systems to ensure they can continue this important work without burning out.

The second cycle of this action research moved toward identifying and implementing practical strategies to reduce stress and prevent burnout among respondents. The first cycle findings had shown how deeply the team was carrying the burden of survivors' stories, while also struggling with systemic barriers, stigma, and the uncertainty of transitional justice. Respondent had repeatedly expressed, especially the district coordinators "*We have no place to share our own pain, and it builds up inside,"* highlighting the urgent need for intentional self-care and collective care structures. This cycle therefore focused on strengthening coping strategies at three interconnected levels: individual, collective, and institutional..

4. Existing Coping Mechanisms and Desired Support Systems

While individual and collective strategies were important, the findings clearly showed that institutional structures were equally necessary. The respondents spoke of how "*the workload affects our family time*" and how difficult it was to rest even during holidays. Long working hours contributed to chronic stress. Building on Participatory Action Research principles, the team themselves had identified advocacy areas such as health insurance, access to professional psychosocial support, and more balanced workloads. Integrating vicarious trauma and stress-management workshops into the organizational calendar made care not a one-time event but an ongoing commitment.

These strategies did not remain abstract. They were tested and refined through stress-management workshops, where the respondents' co- designed and practiced techniques for self-care, collective support, and healthier work-life balance. One of the psychosocial counselor summarized the importance of this approach: "*I realized I am not alone. My feelings are valid. And now I have tools to deal with them."* This cycle, therefore, not only applied theory to practice but also strengthened resilience by placing the respondents' voices and lived experiences at the center of the process.

The third cycle of this action research focused on bringing the findings and proposed strategies back to the respondents for reflection and validation. This stage was essential to ensure that the results were not just the researcher's interpretation, but were firmly grounded in the lived realities of the respondents. During the presentation of findings, the team revisited the key themes that had emerged from the focus group discussions, KIIs, and the vicarious trauma training, such as the challenges of confidentiality, stigma, systemic neglect, and the emotional weight of continuously listening to survivors' stories. They also reviewed the identified signs of burnout, like irritability, sleeplessness, emotional heaviness, and strained family relationships, along with the coping practices they had already been using, including meditation, journaling, and peer sharing.

In the validation discussions, the respondent members were encouraged to openly confirm, add to, or even challenge the findings. This not only ensured accuracy but also fostered a sense of inclusivity. One the team member reflected, "*When I saw our struggles written down, I felt like a mirror was being shown to me. These were exactly the things we lived every day."* The psychosocial counselor added, "*Sometimes we felt like nobody listened to us. But today, I felt our pain was recognized.*" Such responses highlighted how the process itself had been therapeutic, creating space for acknowledgment and collective reflection.

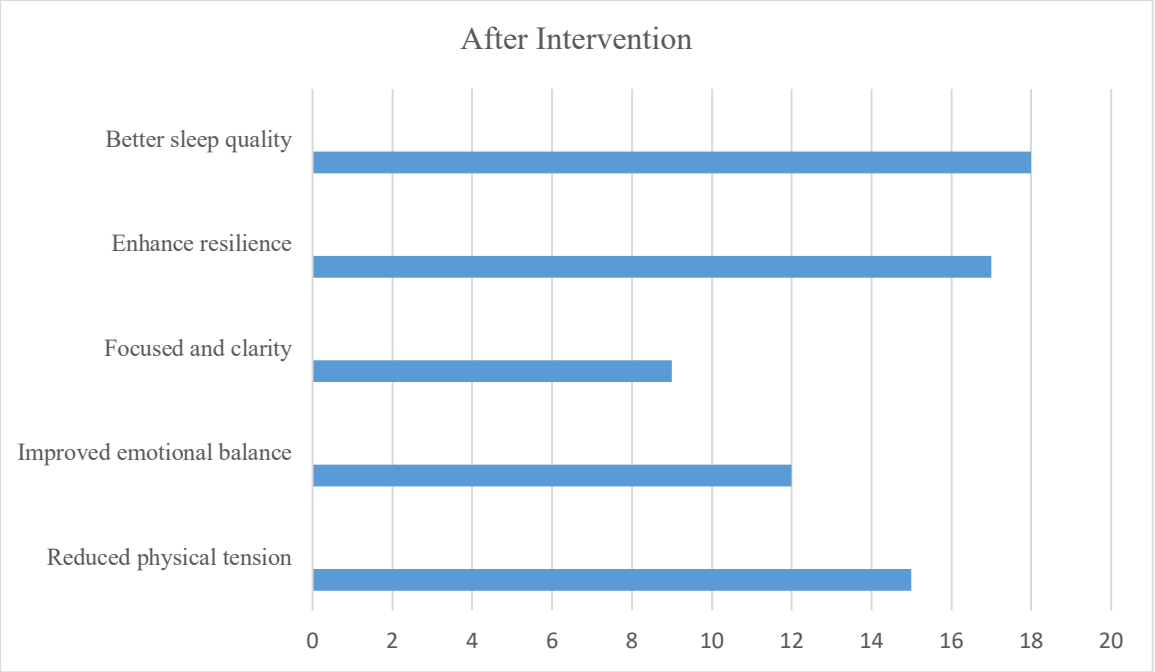
The feedback received in this cycle was directly integrated into refining the stress-reduction strategies. For example, while respondent practices like meditation and journaling were valued, many respondents emphasized the need for more structured collective care spaces. This aligned with the importance of addressing emotional exhaustion and creating supportive environments (Maslach C. , 2016). Similarly, the concept of compassion fatigue explained how ongoing exposure to trauma narratives could overwhelm caregivers, making intentional coping strategies crucial (Figley, 2013). By integrating these insights, the strategies became more practical and designed to the team's realities, rather than generic solutions.

Perhaps most importantly, the validation process nurtured a sense of collective ownership over both the problems and the solutions. Respondent recognized that these strategies were not externally imposed but co-created from their own experiences. As one of the coordinator said, "*If we designed it together, we would also follow it together*." This reflected the Gestalt principle of awareness and co-responsibility, where healing and change emerged through shared recognition and collective action. In this way, the third cycle not only strengthened the strategies themselves but also deepened the team's motivation to sustain them over time.

After Intervention

Once the interventions were introduced, the respondents shared several changes in how they felt and how they handled their work. These interventions included vicarious trauma training, regular stress-management sessions, peer-sharing circles, and individual counseling support. The team said these activities gave them space to pause, reflect, and take care of themselves in a more intentional way.

Figure no. 3 after Intervention



Many respondents said the training helped them understand what vicarious trauma and burnout actually look like. Earlier, they felt something was wrong but did not have the language to explain it. After learning about emotional overload, boundaries, and grounding techniques, they said they were more aware of their own reactions. One counselor shared that they now recognize early signs of stress and take short breaks before feeling overwhelmed.

Several respondents mentioned that the stress-management sessions were practical and easy to use in their daily routine. Breathing exercises, body tapping, and short grounding practices helped them calm their body after difficult interactions with survivors. A few people said they started using these techniques at home as well, especially during moments of anger, heaviness, or sleeplessness.

Peer-sharing circles became one of the most valued parts of the intervention. Respondents said they no longer felt alone with their emotional struggles. Listening to colleagues express similar challenges made them feel understood. One respondent said “she *felt* l*ighter after*

realizing others are also carrying the same weight." These circles also strengthened relationships within the team and created a sense of trust that had been missing earlier.

Many respondents said that individual counseling gave them a private space to talk openly. Some shared that this was the first time they could speak without fear of judgment. They felt more relaxed after releasing some of the emotional pressure they had been holding for years.

At the organizational level, small but meaningful changes were noticed. Team members began taking breaks more consciously instead of pushing through exhaustion. Field plans were discussed more openly, and workload was divided with better awareness of emotional intensity. A few district teams also started setting aside short reflection moments at the end of their meetings.

CHAPTER SIX

CONCLUSION AND RECOMMENDATIONS

6.1 Conclusion

The findings of this action research show in detail how and why the respondents working with survivors of gross human rights violations in Nepal experience burnout. It became clear that burnout is not caused by a single factor, but by the combination of emotional, cultural, and systemic challenges that constantly pressurize on staff. Emotionally, the respondents are exposed to the painful stories of survivors on a daily basis, which can be overwhelming and lead to compassion fatigue. At the same time, cultural expectations and community attitudes, including stigma against survivors, make it difficult for the team to provide support openly or feel recognized for their work. Systemic challenges, such as unclear policies, lack of government recognition of certain cases, and bureaucratic obstacles, add another layer of stress, creating a sense that their efforts may have limited impact. The research also shows that concerns around confidentiality and ensuring the safety of survivors add continuous pressure, as the respondents must direct complex ethical and practical decisions while trying to protect the people they serve. All of these factors together create a persistent mental, emotional, and physical burden, making it essential to understand burnout not just as individual stress but as the result of interconnected workplace, social, and cultural pressures that affect those who dedicate themselves to supporting survivors. The pressures faced by the respondents working with survivors of gross human rights violations show up in many ways and deeply affect both their professional and personal lives. These challenges often lead to emotional exhaustion, where the team feel drained and unable to recover their energy, and depersonalization, where they begin to feel detached from the people they are helping. They also experience a reduced sense of personal accomplishment, feeling that no matter how much effort they put in, their work may not make a noticeable difference. These experiences

align with Maslach's framework of burnout, while also reflecting the compassion fatigue described by Figley, where constant exposure to others' trauma brings pressure on the caregiver, and the "unfinished business" highlighted in Gestalt therapy, where unresolved emotional experiences continue to pressure on a person (R.Figley, 2013). The respondents described how these stressors spill over into their personal lives, causing irritability, sleep problems, physical symptoms such as headaches or body pain, and strained relationships with family members. This shows that the effects of trauma work are not limited to the workplace but are felt in the body, emotions, and social connections, affecting the staff's everyday life. Despite these challenges, the research also highlights the resilience and creativity of the staff, who actively develop strategies to cope with stress and maintain their well-being, finding ways to continue their work while protecting themselves emotionally and physically. This balance between vulnerability and strength brings a complex picture of what it means to support survivors of trauma, emphasizing both the heavy demands of the work and the human capacity to adapt and persevere.

The findings of the research suggest that preventing burnout among the respondents working with survivors of gross human rights violations requires a combination of individual, collective, and institutional strategies. On an individual level, simple daily practices such as meditation, journaling, taking short reflective breaks, and noticing small joys in everyday life can help the respondents feel grounded and maintain emotional balance. These moments allow individuals to pause, process their experiences, and reconnect with their own well-being, which is especially important given the emotionally intense nature of their work. At the same time, collective approaches play a crucial role in supporting staff. Peer-sharing circles, counseling sessions, and group interventions create safe spaces where the respondents can express their feelings, share challenges, and receive validation from colleagues who understand the emotional burden of the work. Such spaces nurture solidarity and reduce

feelings of isolation, which are common when working with survivors of severe trauma. Beyond individual and group efforts, institutional support emerges as a key factor in mitigating burnout. The research emphasizes that organizations need to ensure manageable workloads, provide access to health insurance, and facilitate professional psychosocial support for staff. Additionally, integrating stress management techniques and vicarious trauma workshops into the organizational culture can help normalize self-care and equip the respondents with practical tools to handle the emotional challenges of their roles. In essence, addressing burnout effectively requires a holistic approach where personal coping strategies, peer support, and organizational structures work together to create an environment that sustains both the well-being and the professional effectiveness of the staff. Through this research, which followed a participatory approach, the respondents were not just passive subjects but active contributors in every step of the process. They helped identify the main challenges they face while working with survivors of gross human rights violations, validated the findings that emerged from discussions and interviews, and worked together to develop practical strategies to address these challenges. This approach gave them a real sense of ownership over the solutions and encouraged shared responsibility for taking care of their own well-being as well as supporting each other. The findings show that preventing burnout is not something that can be achieved through a single solution or activity. Instead, it requires action at multiple levels, individual self-care practices, strong peer support systems among colleagues, and active commitment from the organization to create a safe, supportive, and responsive working environment. The respondents need to feel recognized, heard, and prepared to deal with the emotional weight of their work, as well as the systemic and cultural pressures they encounter. In this sense, preventing burnout is both a personal responsibility and a collective effort. It involves continuous attention to how emotional, cultural, and organizational factors interact, and it requires embedding practices that promote resilience,

reflection, and mutual support into the daily routines of the team. Ultimately, this research highlights that sustaining the well-being of the respondents in conflict-affected settings is a long-term, ongoing process, where building supportive structures and fostering an environment of understanding and care is as important as individual coping strategies.

6.2 Recommendations

Based on what this research found, several recommendations can be suggested to help prevent burnout among the program staff who work with survivors of gross human rights violations. Burnout does not happen because of just one reason. It usually comes from a mix of personal stress, challenges within the team, and larger organizational or system-level pressures. Understanding these different factors is important because it shows that supporting staff requires attention not only to their individual well-being but also to how teams function and how organizations create a supportive environment. By addressing all these areas together, it is possible to reduce stress, improve staff resilience, and ensure that they can continue their important work without becoming overwhelmed.

1. For Local Partner Organizations with NA:

From the interviews, it was found that senior staff supervise and guide the junior staff, which gives juniors space to share their feelings. But since the organization does not have proper systems or expertise in mental health, it struggles to support the senior staff. This leaves the seniors, who carry more responsibility and emotional stress, without the care and support they also need.

To address this, organizations should create clear policies and systems like reflection meeting, sharing spaces, capacity building etc. that reduce stress factors like lack of resources, or inconsistent recognition of staff efforts. Training on vicarious trauma and

burnout, along with access to mental health support, can help staff manage emotional challenges better.

When organizations combine strategies that support individual self-care, promote collective team support, and take clear institutional responsibility for the respondent's well-being, they create an environment where the team feel recognized, empowered, and adequately prepared to carry out their responsibilities. This approach not only helps prevent burnout but also ensures that survivors receive consistent, good care. Over time, this kind of sustained support strengthens both the team resilience and the effectiveness of survivor-centered programs, creating a workplace where the well-being of the respondents and the needs of survivors are both valued and addressed.

2. For the Program Team working with CRSV Survivors:

One of the most important steps is to strengthen individual self-care practices, which means making sure that the respondents have regular, organized opportunities to reflect, rest, and restore their energy. This could include scheduled time for activities that promote mental and emotional well-being, such as mindfulness exercises, journaling, or simply having quiet time away from work pressures. Encouraging the respondents to recognize their own limits and to take breaks without guilt can also help them maintain resilience over time.

To support the respondents working with survivors of gross human rights violations, it is important to establish daily routines and practices that help them manage emotional stress before it builds up. This can include activities like journaling to reflect on experiences, meditation to calm the mind, short mindfulness exercises to stay present, and other grounding techniques that allow the respondents to pause and reset. These practices should not be treated as optional extras but as essential parts of professional responsibility, so that taking care of mental and emotional health becomes a normal and encouraged part of work.

Organizations need to build strong collective care systems that are formally integrated into their processes. This can involve regular peer-support circles, confidential spaces for sharing experiences, and structured team debriefing sessions led by trained counselors. These shared spaces give the respondents the opportunity to process difficult emotions together, reduce feelings of isolation, and strengthen resilience through mutual support. Such measures are especially crucial in this context because the respondents are regularly exposed to traumatic stories, which can increase the risk of burnout and compassion fatigue. By combining individual routines with structured collective support, organizations can create an environment where emotional well-being is prioritized, stress is managed proactively, and the respondents are better equipped to continue their work effectively and sustainably.

3. For Nagarik Aawaz

The findings from this action research show that the emotional wellbeing of the team is directly connected to the quality and sustainability of programs, especially for those working with CRSV survivors. For this reason, it is important for Nagarik Aawaz to invest more deeply and consistently in long-term staff development, among its local partner organizations.

The team carry heavy emotional responsibilities every day. They listen to painful stories, respond to crises, and work within a system that is often slow, uncertain, and unpredictable. Over time, this puts them at risk of burnout, compassion fatigue, and emotional exhaustion. To address this, Nagarik Aawaz can strengthen its role as a supportive institution by planning long-term professional development that goes beyond the immediate demands of project implementation.

This development plan could include regular training on trauma-informed practice, crisis management, stress regulation, and grounding techniques. It can also offer opportunities for

staff to upgrade their skills through workshops, exposure visits, refresher courses, and advanced learning programs. These efforts will help staff stay confident and effective even when working in emotionally challenging situations.

In addition, Nagarik Aawaz can expand the support it provides to local partner organizations. Many local teams work directly with survivors in remote areas and often feel isolated in their roles. By offering consistent guidance, structured supervision, and emotional support, NA can help strengthen these teams and ensure that partners feel connected to a larger support system.

Another important step is recognizing that burnout prevention is not a secondary concern, but a key part of program quality. When staff feel valued, supported, and emotionally grounded, their capacity to serve survivors improves. To make this possible, Nagarik Aawaz could allocate dedicated resources to staff wellbeing, such as regular counseling services, team-building activities, periodic reflection and sharing spaces, flexible workload management, and annual retreats or rest periods.

The organization can also create a culture where emotional labor is openly acknowledged. Simple practices like recognizing effort, appreciating staff contributions, and making space for honest conversations about stress can go a long way in building resilience. Leaders and supervisors can be trained to identify early signs of burnout and respond in supportive ways.

By establishing a long-term system for professional and emotional support, Nagarik Aawaz can ensure that both survivors and staff receive consistent, high-quality care. This will not only strengthen program outcomes but also build a healthier, more motivated, and more resilient workforce across all districts.

REFERENCES

Singh, S. (2020). Transitional Justice (TJ) Mechanisms in Nepal: Victims' Needs and State Responses.

Windle, G. (2011). What is resilience? A review and concept analysis.

Channawar, S. (2023). *A Study on The Cause and Effect of Burnout*.

Lampert, B. &. (2017). Detached Concern, me and my clients–Professionals' emotion regulation, burnout, and patients' care quality at work. In Emotions and identity .

Wrenn, L. J. (2005). The relationship between personal trauma exposure and secondary traumatic stress for social workers.

Taylor, M. (2014). *Trauma Therapy and Clinical Practice: Considerations of Neuroscience, Gestalt and the Body.* UK: McGraw-Hill Education.

MacDonald, C. (2012). *Understanding participatory action research: A qualitative research methodology option.*

Bride, B. E. (2007). Prevalence of Secondary Traumatic Stress Among Social Workers. *Social Work*, 63-70.

Baird, K. &. (2006). Vicarious traumatization and secondary traumatic stress: A research synthesis. *Counselling Psychology Quarterly*, 181–188.

Perls, F. H. (1951). *Gestalt Therapy: Excitement and Growth in the Human Personality.* New York: Julian Press.

Taylor, J. (2019). *Self-care strategies for professionals working in trauma-exposed environments.* New York, NY: Routledge.

VandenBos, J. C. (2018). *Leaving It at the Office: A Guide to Psychotherapist Self-Care.* New York, NY, USA: Guilford Press.

Demerouti, A. B. (2017). Job Demands–Resources Theory: Taking Stock and Looking Forward. *Journal of Occupational Health Psychology*, 273–285.

Maslach, C. (2016). *Burnout: The Cost of Caring.* Malor Books.

Pross, C. (2006). Burnout, vicarious traumatization and its prevention. *Torture*, 1-9.

Bhandari, R. k. (2015). *Transitional Justice in Nepal: The Perspective of the Victims.* JusticeInfo.net platform.

R, K. P. (2017). *Human Rights Violations during Armed conflict in Nepal.*

Robins, S. (2012). Transitional justice as an elite discourse: Human rights practice where the global meets the local in post-conflict Nepal. *Critical Asian Studies*, 3–30.

Kienzler, H. &. (2020). The long-term mental health consequences of torture, loss, and insecurity: a qualitative study among survivors of armed conflict in the Dang District of Nepal. *Frontiers in Psychiatry*.

Sharma, B. &. (1998). Preventing torture and rehabilitating survivors in Nepal. *Transcultural Psychiatry*.

Haider, H. (2009). *Community-based approaches to peacebuilding in conflict-affected and fragile contexts.* Birmingham, UK: Governance and Social Development Resource Centre (GSDRC), University of Birmingham.

Knuckey, S. S. (2017). *Trauma, depression, and burnout in the human rights field: Identifying barriers and pathways to resilient advocacy.* 267: HRLR Online .

Satterthwaite, M. K. (2019). From a Culture of Unwellness to Sustainable Advocacy: Organizational Responses to Mental Health Risks in the Human Rights Field.

Walker, M. L. (1993). Participatory action research. *Rehabilitation Counseling Bulletin* , 2-2.

Rea, L. M. (2014). *Designing and conducting survey research: A comprehensive guide.* New Jersey, USA.: John Wiley & Sons.

Justice)., I. (. (2014). *The Missing Women of Nepal: A Gendered Analysis of Enforced Disappearance and Sexual Violence.* kathmandu: ICTJ (International Center for Transitional Justice).

OHCHR, O. o. (2012). *Nepal Conflict Report: An Analysis of Conflict-Related Violations of International Human Rights and Humanitarian Law.* Geneva, Switzerland: United Nations.

Poder, I. B. (2018). Emotional dynamics in conflict and conflict transformation. *Peace and Conflict: Journal of Peace Psychology*, 5–12.

Government of Nepal, M. o. (1996/2053BS (revised draft 2017)). *National Mental Health Policy* . Ministry of Health, Government of Nepal.

Rights of Persons with Disabilities Act, 2017. (2017). Kathmandu: Government of Nepal.

Labour . (n.d.).

Nepal, G. o. (2017). *Labour Act.* Ministry of Labour and Employment / Nepal Gazette.

Maslach, C. &. (1997). *The truth about burnout: How organizations cause personal stress and what to do about it.* Jossey-Bass.

Lederach, J. P. (1997). *Building peace: Sustainable reconciliation in divided societies.* United States Institute of Peace Press.

R.Figley, C. (2013). *Compassion fatigue: Coping with secondary traumatic stress disorder in those who treat the traumatized.*

Figley, C. R. (2013). *Compassion fatigue: Coping with secondary traumatic stress disorder in those who treat the traumatized.* NY: Brunner/Mazel.

(n.d.). Retrieved from https://www.lawcommission.gov.np.

ANNEXES

Annex 1: Focused Group Discussion Questionnaire

1. What are the biggest challenges you face while working with survivors of gross human rights violations?
2. How does listening to survivors stories impact our mental and emotional well-being over time?
3. What are the signs of stress or burnout that we experience while working in this field?
4. What kind of support (emotional, professional, or institutional) do we think would help reduce stress and prevent burnout?
5. How does the delay in the transitional justice process affect our motivation and emotional resilience in our work?
6. Have we ever hesitated to seek mental health support due to stigma or workplace culture? If yes, what were the reasons?
7. What coping strategies or self-care practices do we personally use to deal with stress related to our work?
8. What changes would you like to see to create a healthier and more supportive work environment?

Annex 2: Key Informant Interview Questionnaire

1. How do we perceive the current state of Nepal's transitional justice process, particularly in addressing the needs of CRSV survivors? What challenges do you see in ensuring justice and accountability for these survivors?
2. What role does your organization play in supporting CRSV survivors in the context of Nepal's transitional justice process? How do you ensure that survivors' voices are heard and their needs are met?
3. What are the most significant challenges your team faces when working with CRSV survivors, especially in terms of emotional and psychological stress? How do these challenges impact the effectiveness of your programs?
4. In your experience, how prevalent is burnout among your team members who work directly with CRSV survivors? What factors contribute to this burnout, and how does it affect their ability to provide support?
5. What support systems or interventions does your organization currently have in place to address burnout and secondary trauma among staff working with CRSV survivors? How effective do you think these systems are?
6. How do cultural and societal norms in Nepal, such as stigma around mental health and sexual violence, impact the work of your team and the survivors they support? How do you navigate these barriers?
7. How does your organization integrate mental health and psychosocial support into its programs for both CRSV survivors and the staff working with them? What gaps do you see in the current approach?
8. Based on your experience, what recommendations would you make to improve the support systems for both CRSV survivors and the program teams working with them? How can these systems be better aligned with the transitional justice process in Nepal?

Annex 3

Nagarik Aawaz

Vicarious Trauma Training

Padmalaya, Nawalpur

26th-27th April, 2025

Time	Session	Content	Method
9:00-9:30	Welcome and Check-in	Candle lightening expectations, energy check	Circle sharing, ground rules
9:30–11:00	Quick Recap: What is Vicarious Trauma?	Brief review of what VT is How it happens, signs in mind, body, emotions	Group discussion with flipchart
11:00-11:15	Tea Break		
11:15-12:15	What Has Changed Since Basic Training?	Reflect on: How am I doing now? What did I apply from past learning?	Pair share → large group sharing
12:15-1:00	Understanding the Deeper Impact of VT	How repeated exposure to surivivors' pain affects our values and beliefs	Short presentation/ drawing exercise
1:00-2:00	Lunch		
2:00–3:15	Reflection Session: Mapping Our Journey	Create a timeline of our work with survivors and mark emotional highs and lows	Individual work → small groups
3:15–3:30	Tea Break		
3:30–4:30	Personal Signs and Triggers	Identifying early warning signs and personal triggers of vicarious trauma	Body scan/drawing/ group reflection
4:30–5:00	Closing Circle	Reflection, feelings, and appreciation	

Day 2

9:00–9:30	Check-in	Brief mindfulness/breathing, reflection on Day 1	Guided grounding/pair sharing
9:30–11:00	Self-Care vs. Collective Care	What's the difference-How do we care for ourselves and each other in this work?	Story sharing/small group discussion

11:00–11:15	**Tea Break**		
11:15–1:00	Resilience	Exploring tools: boundaries, rest, joy, movement, nature, talking, art	Activity
1:00-2:00	**Lunch**		
2:00–3:00	Creating a Supportive Work Culture	What do we need from each other? What practices or agreements can we adopt as a team?	Group brainstorm
3:00-3:15	**Tea Break**		
3:15-4:30	Healing Circle: Stories of Strength	Share a story where they felt strong or supported in this work	Story circle and symbols
4:30-5:00	Closure	Reflection and Commitment	