



Researcher Self-Care Protocol

Digital Preservation of Reproductive Health Resources: Archiving the 8th

This Self-Care Protocol was designed by and for the researcher on the **Digital Preservation of Reproductive Health Resources: Archiving the 8th** project, specially for researcher(s) working on the **In Her Shoes: Women of the Eighth** Facebook page. Data from this collection contains sensitive and potentially traumatic data therefore, researchers are advised to read this document and devise their own self-care protocol when working with the material.

Working on sensitive research may increase the risk for vicarious trauma; secondary traumatic stress; or burnout, this is referred to as 'trauma contagion'.¹ Vicarious trauma occurs following long-term exposure to the stories of

¹ Sharon Lambert, 'Toward a Trauma Responsive Criminal Justice System: Why, How and What Next', ICJAC Report 2018, pp. 32-33, <https://www.acjrd.ie/images/PDFs/icja/ICJAC REPORT 2018 - Toward a Trauma-Responsive Criminal Justice System Why, How and What Next.pdf>

Image: Art by Magda Ćwik (www.magdacwik.com).
Mural commissioned by Amnesty International Ireland for Electric Picnic Festival, 2018.

traumatised service users and may cause decreased motivation and empathy.² Secondary traumatic stress, like burnout, is characterised by ‘intrusive imagery, hyperarousal, and avoidance.’³ Chronic exposure to the realities of trauma can lead to feelings of grief, rage, outrage, sorrow, desensitisation and loss.⁴

Practicalities of Researcher self-care:

- Prepare for psychological impact by talking to people after the research. This includes Regular briefings, once a week. The MU Researcher on this project will meet on Tuesdays at 4pm with the RIA archivist. They will also meet monthly with another researcher in TCD who is similarly looking at researching sensitive and traumatic data.
- The Researcher on this project will keep a journal and write before and after “coding/cataloguing” stories.
- Work early: Coding will be done first thing in the morning. Research/coding will not be done at the end of the day or last thing on a Friday.
It is scheduled in the morning so that the Researcher can do other work after coding so that the traumatising material is not the last thing worked on.
- Pace the work: Initially, the Researcher will spend no more than 30 minutes per day coding. This will increase to 45 mins after the two weeks, an hour after a month and 90 minutes after 6 weeks. This will be reviewed after 6 weeks.
- When journaling before starting to code, recognise ‘fatigue point’ and leave it if you can’t do it. Talk to your supervisor if you are finding a period particularly difficult.
- Down time: The Researcher will spend one hour walking and listening to music to relax after coding.
- Physical Boundaries: Due to COVID-19 restrictions, the Researcher currently works in her bedroom. For separation of work and life, she will physically put the material away- put laptop and material in a drawer so as not to keep the work open.
- Know the signs of vicarious trauma, secondary traumatic stress and compassion fatigue, which are:

Physical Signs:

- Insomnia Headaches
- Sore back and neck
- Rashes
- Breakouts
- Grinding your teeth at night

² Pearlman, L. A., & Mac Ian, P. S. (1995). Vicarious traumatization: An empirical study of the effects of trauma work on trauma therapists. *Professional Psychology: Research and Practice*, 26(6), 558–565. <https://doi.org/10.1037/0735-7028.26.6.558>

³ Whitt-Woosley, Adrienne & Sprang, Ginny. (2017). Secondary Traumatic Stress in Social Science Researchers of Trauma-Exposed Populations. *Journal of Aggression, Maltreatment & Trauma*. 1–12.

⁴ Canfield, J. (2005). Secondary Traumatization, Burnout, and Vicarious Traumatization: A Review of the Literature as It Relates to Therapists Who Treat Trauma. *Smith College Studies in Social Work*, 75(2), 81–101. https://doi.org/10.1300/J497v75n02_06

- Heart palpitations
- Hypochondria
- Emotional/Psychological Signs
- Emotional exhaustion
- Negative self-image
- Depression
- Impaired appetite or binge eating
- Feelings of hopelessness
- Guilt
- Dread of working with certain clients
- Diminished sense of enjoyment/career
- Depersonalization – spacing out during work or the drive home
- Distorted world-view,
- heightened anxiety or irrational fears
- Hypersensitivity to emotionally charged stimuli Insensitivity to emotional material/
numbing
- Suicidal thoughts

Behavioural Signs:

- Anger and Irritability at home and/or at work
- Increased use of alcohol and drugs
- Avoiding colleagues and staff gatherings
- Impaired ability to make decisions
- Impostor syndrome – feeling unskilled in your job
- Problems in personal relationships
- Difficulty with sex and intimacy due to trauma exposure at work
- Thinking about quitting your job

