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Abstract

Increasingly, humanitarian aid personnel are exposed to both vicarious and primary traumatic events. The Post-mission Altruistic Identity Disruption Questionnaire (PostAID/Q) was developed with the aim of guiding humanitarian organizations in the psychosocial aftercare of personnel and their reintegration within families, the workplace and society. Altruistic Identity Disruption refers to interrelated feelings of doubt, isolation, and self-blame in response to perceived invalidation of their humanitarian role. As such it is concerned with re-integration difficulties experienced by returnees from humanitarian work following exposure to adverse events. The PostAID/Q is an 18-item self-report measure designed to assess *Altruistic Identity Disruption.* Sixty-one aid personnel completed an initial pool of 79-items developed by the authors from semi-structured interviews with aid personnel. Following inspection of item frequencies, 36 items were retained and subject to exploratory principal components analysis which provided evidence of a strong one-factor model. Finally, 18-items were selected to compose the PostAID/Q. The Post Altruistic Identity Disruption Questionnaire (PostAID/Q) promises to be useful to humanitarian organizations in the post-mission psychosocial assessment of returnees and subsequent readiness for redeployment.

KEY WORDS: altruistic identity; altruistic identity disruption; humanitarian trauma.

Post-mission Altruistic Identity Disruption Questionnaire (PostAID/Q):

Preliminary development of a measure of responses following adverse

humanitarian aid work.

Since the end of the Cold War inter-territorial crises including war and genocide, and natural disasters have affected many countries. Humanitarian aid personnel, both national and international, are often the first to be deployed in any relief effort despite great psychological risk to themselves (Lopes Cardozo, Holtz, Kaiser, Gotway et al, 2005). Yet there is a paucity of research concerning the effects of war, genocide and humanitarian emergencies on humanitarian personnel and their subsequent readiness for redeployment.

 Aid personnel are more likely to become ill, die, or be killed in the field than their non-mission colleagues (Loquercio, 2006; McCall & Salama, 1999). Over 300 humanitarian aid workers were killed between 1997 and 2005 (Lischer, 2007). Despite this, very few cases have been prosecuted (King, 2002) irrespective of the Rome Statute of the International Criminal Court ruling the murder of humanitarian personnel a war crime. Increasingly they are viewed as political actors caught in an overlap of humanitarian and military agenda (Barnett, 2005) yet neither personal injury nor environmental factors impacting on aid personnel are included in wartime morbidity and mortality statistics (Hynes, 2004).

Many aid personnel experience high levels of stress, and feel alienated from, or rejected by, their families, communities, and society on homecoming (McCormack et al, 2009; Loquercio, 2006). Without adequate support structures mental health problems such as posttraumatic stress disorder and depression may develop (Lopes Cardozo et al, 2005).

The dual threats of humanitarian aid work

Although not all humanitarian personnel work in unstable environments many have experienced war, genocide or disaster. Compounding any personal physical or psychological threat, assisting the most vulnerable can leave the aid worker susceptible to what is variously known as secondary traumatic stress' 'compassion fatigue', or 'vicarious traumatization' (Figley, 1995, 1998; McCann & Pearlman, 1990; Pearlman & Saakvitne, 1995). In susceptible individuals this indirect exposure to a traumatic event can result in both transference of psychological distress and changes to memory systems, including prior views of self and the world (Figley, 1995, 1998; McCann & Pearlman, 1990; Pearlman & Saakvitne, 1995). It can elicit feelings of self-doubt, isolation and anxiety as well as guilt for not being able to relieve the distress of the primary sufferer (Wilson & Lindy, 1994; McCormack et al., 2009). A combination of primary and secondary exposure to complex trauma is an occupational health problem likely to affect good humanitarian practices in the field and psychosocial reintegration post-mission (McCormack et al., 2009).

Altruistic Identity/Altruistic Identity Disruption (AI/AID)

In earlier qualitative research by the authors, the construct of *altruistic identity disruption (AID)* (McCormack et al, 2009) defined post-mission reintegration processes that left the returnee feeling alienated from their family, community, and society. *AID* was manifest through highly interrelated feelings of isolation, questioning personal role in humanitarian work and its value, and engaging in self-blame; when the returnee's deploying organization was not perceived to validate their efforts and support intimate family reintegration post-mission.

Paradoxically, *AID* may influence a desire for early redeployment within the aid worker where other aid personnel are able to provide the validation that they seek, but at a time when they are at their most vulnerable and lack the psychological readiness for redeployment. Thus, redeploying individuals for further missions before prior reintegration processes are complete may contribute to chronic and cumulative psychological distress and further social dislocation.

AID highlights complex psychosocial challenges that if not adequately supported may complicate healthy psychological adjustment in returnees from the humanitarian context. The importance of that support lies in recognizing the duality of the humanitarian context for impacting on wellbeing, i.e. a context in which the carer is at risk of vicarious traumatization while personally at risk of primary traumatization from complex environmental factors. It focuses on initial responses from humanitarian experiences that may create susceptibility to chronic dislocation and psychological morbidity when there is an absence of validating support structures both in the field and post-mission.

Importantly, recruiting organizations can provide key psychosocial mediation and support (Lopes Cardozo et al., 2005; McCormack et al., 2009) by: assisting individuals in the process of disengaging from role identity and reintegrating with society and family, and giving due attention to an individual's psychological readiness, frequency of exposure, and wellbeing for redeployment. Having such psychosocial support structures in place would: 1) afford the recipients of humanitarian care the benefit of psychologically robust carers, 2), potentially reduce burnout and turnover of staff and the subsequent economic implications of

perpetually training new personnel, and 3) provide the platform for effective and healthy family reintegration of highly skilled and capable personnel.

A tool that would assist in identifying *altruistic identity disruption* and readiness for redeployment may help identify personnel psychosocial difficulties post-mission. Therefore, the aim was to develop a short screening tool for the assessment of *altruistic identity disruption*.

Method

Development of item pool

Previous qualitative research was carried out by the authors with four humanitarian aid personnel who had worked for many years in international development and emergencies across the areas of field work, management, and in aid consultancy (see McCormack et al, 2009). All four of the respondents had experienced many personally and professionally challenging situations in Africa, India, the Balkans, South East Asia and the Pacific. These included experiencing or witnessing evisceration, publicly displayed beheadings, assisting with mass burial of dead women and children, machete attacks, looting and burning, being threatened at knifepoint and rape. Three had been present on aid assignments during the turmoil of genocide.

The first author has previously worked in aid and as a trauma psychologist including providing psychological support to aid personnel. The second author is an expert in traumatic stress, and questionnaire design. Following regular discussion between the authors to ensure readability and clarity of the items, a pool of 70 statements were derived from the interview data that reflected: a) interpretation of the personal effects of aid work including how they had changed because of aid

work; b) their sense of being valued by friends and family on return from aid work; and c) their perception of their recruiting organization's support for reintegration and support post-mission. Each of the 70 items was rated on a 6-point scale: 1= Strongly Disagree; 2 =Disagree Somewhat; 3 = Disagree Slightly; 4 = Agree Slightly; 5 = Agree Somewhat; 6 = Strongly Agree.

The 70 items were piloted with 23 aid personnel who had experienced greater than one international humanitarian mission. We asked participants to comment on the content, language used, and complexity of the items. All contact with the participants involved in the piloting was through email communication. All participants were assured of anonymity and confidentiality. Following this piloting stage, items were reworded and 7 new items added, so that the final item pool consisted of 79 items.

Participants and procedure

Sixty one participants (34 women and 27 males) were contacted and asked to complete the 79-item questionnaire (see Table 1). Participants were sourced through ReliefWeb, a web-link support group, for Humanitarian Aid Workers, various aid organizations, and word-of-mouth to aid colleagues. Of the 61 participants, 44 had been on 2 or more international aid missions with 28 having been deployed on 4 or more international aid missions. All expressed experiencing psychologically challenging experiences. All participants were assured of anonymity and confidentiality and the procedure was approved by the appropriate University ethics committee.

Results

First, the frequency of endorsement of each of the 79 items was inspected. As our aim was to

develop a measure of individual differences we deemed it important that there was sufficient

variability in response. As such we set a criteria that no less that 30% of respondents would

endorse either the *agree* or *disagree* items. For example, 72% disagreed at least a little with

item 40, and so this item was rejected as not providing sufficient variability in response (see

Table 1). This procedure reduced the initial item pool from 79 to 36 item.

- Insert Table 1 about here-

Principal-components analysis of the PostAID/Q

Principal-components analysis (PCA) was then conducted on the 36 items. PCA is

recommended as the first step to reveal information about the probable number and nature of

factors (see Byrne, 2001; Tabachnick & Fidell, 1996). As our aim was to develop a

unifactorial measure consistent with our theoretical premise that *AID* is best characterized as

inter-related experiences of isolation, doubt, and self-blame related to the perception of

invalidation, it was important that Cattell's (1966) scree test provide evidence for a one

component solution. The scree test is recommended as a test for the number of components in

cases where there is a clear and easily interpretable scree slope (Zwick & Velier, 1986).

Inspection of the scree test clearly suggested a one component solution (see Figure 1).

-insert Figure 1 about here-

Thus, a forced one-component solution was computed (see Table 2). In order to

select items for the final scale, only those items which loaded on the component at greater

than 0.40 were retained. Twenty two items loaded greater than 0.40. Scrutiny of the 22

items resulted in the deletion of 4 questions in order to reduce repetition: item 32 was deleted

in favor of item 64; item 6 was deleted in favor of item 36; item 34 was deleted in favor of item 69; and item 68 deleted in favor of item 66, leaving 18 items (see Appendix 1).

-insert Table 2 about here-

Finally, a further principal components analysis with a forced one component solution was conducted on the resultant 18 items which showed all 18 items to load between 0.56 and 0.84 on the component.

-insert Table 3 about here-

Scoring procedure

As some of the 18 items are positively worded, these were re-coded so that scores on the total 18-item scale have a potential range of 18 to 108, with higher scores indicating greater *altruistic identity disruption* (mean = 61.81; SD = 14.601). Internal consistency reliability for the 18 items was satisfactory (α = 0.84). There was a trend towards a statistically significant difference between with women and men, with women (*M* = 65.29, *sd* = 13.75) scoring higher than men (*M* = 57.75; *sd* = 14.80) on the PostAID/Q (*t* (50) = 1.90; *p* = .06).

Discussion

As yet, the pervasiveness of psychosocial morbidity in the humanitarian sector is unknown. Currently there are no humanitarian exposure-specific measures to assist humanitarian organization assess how well their staff are adjusting and reintegrating following adverse humanitarian experiences. The PostAID/Q is an 18 item self-report measure that can be used to provide an index of *altruistic identity disruption* in returnees from humanitarian work. It is a tool to alert organizations to responses in returnees that may

indicate dissatisfaction with outcomes of mission or organizational support and feelings of personal dissatisfaction, self blame, and perceived invalidation from others. The PostAID/Q is not designed to replace clinical assessment in returnees exposed to complex international situations. Many such tools already exist to assess problems of posttraumatic stress, burnout, depression, and anxiety. It needs to be stressed that the PostAID/Q is not meant to replace these or 'lessons learned' evaluations already in place in many organizations. Similarly, it should not be used by human resources or management personnel to decide an individual's psychosocial wellbeing for redeployment. It is designed as a guide and indicator to assist organizations in their aftercare of personnel.

On the basis of face validity, we would suggest that scores greater than 72 are likely to be indicative of further clinical exploration but further research is now needed to firmly establish the clinical utility of the measure.

Research directions

There are a number of limitations to this study. First, our sampling methodology prevented us from knowing how representative our sample was in relation to the larger aid population. However, the strength of the research is that the participants were all drawn from the aid population directly rather than from the general public. As such it is a relevant sample and our items reflected the lived experiences of participants.

However, the number of participants was lower than that recommended for principal components analysis. This would be highly problematic if we had wished to develop a multifactorial measure, but as our aim was to develop a single scale based on our theoretical conceptualization of AID as consisting of interrelated feelings of doubt, isolation, and self-blame in response to perceived invalidation, we were less concerned as our use of principal

components analysis was to select the items that were most highly intercorrelated for

inclusion on a single scale. Nonetheless, further research is now necessary to establish in

more detail the single factor scoring procedure of the 18 item scale and its psychometric

properties of reliability and validity. In particular, longitudinal research to test the

relationship of the Post AID/Q to later problems of social and occupational functioning is

now needed in order to establish its predictive validity. It seems likely that high scores on the

postAID/Q for a prolonged period of several months following return will be increasingly

predictive of psychological difficulties.

Finally, the PostAID/Q promises to be a useful tool in clinical research and

psychosocial interventions following adversity or trauma, and promises to be of benefit to

individual aid personnel in identifying those who are vulnerable to later difficulties. It can

also guide those who support humanitarian personnel in the aftercare of individuals and their

reintegration within families, the workplace and society.

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Figure 1. Scree plot showing the principal-components analysis of 36 Post Altruistic Identity
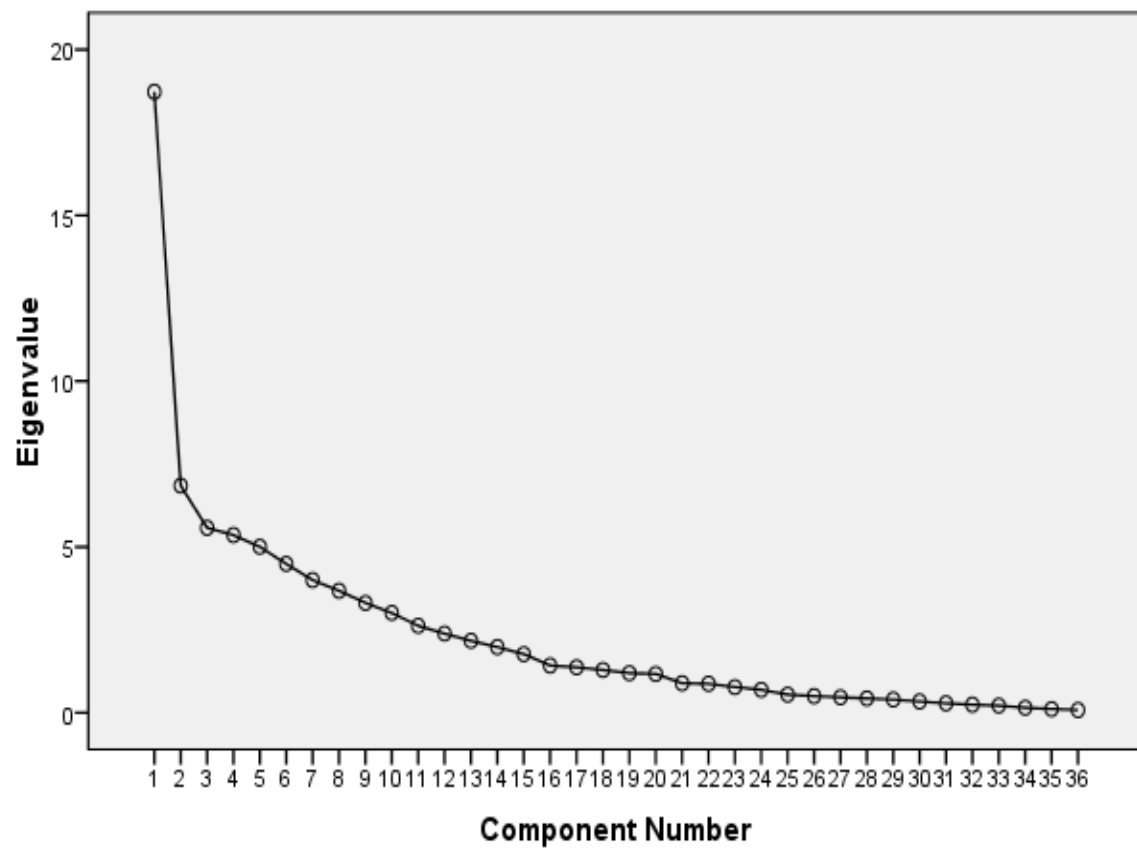
Disruption Questionnaire items.

Table 1. Means, standard deviations and frequency of endorsement

79 Items		Mean	SDs	% [1]
1	Since returning I prefer to be with people who have been on aid missions	3.39	1.50	49.2
2	I think aid organizations draw good things out of people	4.25	1.06	18.0
3	When on mission I often check with myself that I am reacting in a way that's helpful	4.56	1.26	20.3
4	While on mission sometimes I have felt shocked by my lack of empathy	3.41	1.66	47.5
5	While on mission I felt part of an organization with really good people in it.	4.70	1.27	18.3
6	I'm left with a lot of doubts about my contribution to aid	3.74	1.70	39.3
7	I make sure I do something for myself while in the field e.g. run, pray, write	5.02	1.27	11.5
8	I try to take time to reflect about things that have affected me when in the field	4.58	1.25	43.3
9	When I come home I make sure I get back to doing things I enjoyed before, e.g. gardening, walking, sport	5.05	1.19	28.3
10	I enjoy the adrenalin rush you get from this sort of work	4.57	1.26	14.8
11	I think some people burn out from aid work	5.25	1.11	4.9
12	I've worked with some people who are quite a nuisance in the field	5.05	1.31	11.5
13	I get a lot of satisfaction from doing things around my home on my return	4.80	1.41	19.7
14	I feel I must go on trying to stop the kind of things that cause such suffering	4.30	1.54	23.0
15	I am a person who can't just wash my hands of the inequity in the world	4.54	1.43	27.9
16	I often felt bitter on mission that I couldn't do anything about many things I saw	3.53	1.64	50.0
17	I often felt disgust that someone I saw in the field was reduced to such a terrible state	3.28	1.75	55.7
18	I don't think aid work makes people more happy	3.70	1.58	43.3
19	I find that aid work confronts important and momentous issues	4.84	0.97	70.5
20	I find it totally unacceptable that people are dying for want of a few basic things that many of us take for granted	5.30	1.04	4.9
21	I feel very satisfied with the way my work has gone for me in the aid world	4.48	1.38	43.3
22	I have ended up with feelings of loss and sadness from aid work	3.70	1.45	36.7
23	Sometimes I felt completely bowled over in the field by what I experienced	4.03	1.35	27.9

24	Sometimes I feel that I just achieved nothing on mission	3.10	1.67	54.1
25	I feel that openness and the ability to give and receive criticism are vital in these organizations	5.51	0.70	100.0
26	I feel that humanitarian aid work has not changed the person that I am	3.19	1.65	62.1
27	I've never met anybody who regretted ever having come near this field of work	3.69	1.71	45.9
28	I tend to block out all sorts of aid experience	4.03	1.34	34.5
29	On mission I found there were times when I seemed to be going off the rails	3.54	1.72	42.6
30	I felt a sense of being personally eroded while on mission	3.39	1.74	55.9
31	I did it for a good reason and therefore have an underlying sense of satisfaction	4.72	1.14	8.2
32	I think a lot of aid workers end up quite badly affected by field work	3.85	1.53	37.7
33	I get a warming sense that I'm doing something useful when I go on mission	4.74	0.96	72.1
34	Sometimes I would suddenly act angry in the field	3.11	1.74	55.7
35	It seems to me that aid work has a negative effect like carrying a weight around with you	2.34	1.31	81.0
36	I have been left with a lot of internal doubts from my aid work	3.20	1.70	55.7
37	I feel undervalued by the organization that sent me on aid work	3.26	1.83	54.1
38	I tend to blame myself if things go wrong on mission	3.57	1.45	41.7
39	When I spoke to my organization on return, they knew what had been happening for me in the field	3.68	1.55	50.9
40	There are a lot of negative feelings at the back of my mind since aid work	2.37	1.35	72.9
41	I find myself thinking more and more angry thoughts when in the field	1.98	1.16	86.7
42	I think it's guilt that screws people up so much after aid work	2.12	1.12	87.7
43	Being in the field works well when you manage your manager back home rather than them managing you	3.81	1.61	34.0
44	I think when there is the ability to criticise upwards, aid organizations work well	4.58	1.25	18.3
45	I find it very difficult to communicate with people who haven't been in aid work	2.50	1.59	73.3
46	I think very emotive incidents while on mission can lead to guilt feelings	3.65	1.54	35.0
47	I make sure there are people I can offload with every now and again when in the field	4.76	1.37	15.5
48	Back home, if I start talking about events that happened in the field, I find people are desperate to get away from me	2.77	1.27	65.0
49	I think good team dynamics in the field are paramount to	5.68	0.57	100.0

	a successful mission			
50	I often feel sorry for myself since coming home	2.05	1.37	81.7
51	I believe the best organizations have open systems with good communication	5.68	0.47	100.0
52	I feel blamed for not having found a solution while on mission	2.37	1.61	76.3
53	I feel the organization didn't want me anymore after I returned	2.37	1.55	76.3
54	I think this kind of stuff, aid work, has a negative effect over all	1.90	1.26	91.7
55	My contribution to aid work was valued when I got home	4.67	1.10	43.3
56	Post aid I am intolerant of what seems trivial things	3.88	1.62	30.0
57	I think it's important to talk or get counselling when we get back from mission	4.87	1.35	15.0
59	I feel family members are not interested in what I did on mission	2.92	1.47	62.7
60	I find doing aid work provides an immense satisfaction	4.95	1.08	6.7
61	I had the support of a committed permanent relationship back home while I was on mission	4.07	1.97	38.6
62	I think if aid systems work well, they enable you to extend yourself	5.13	0.97	25.0
63	Post-mission I take time out to replenish myself	4.98	1.15	32.2
64	I was quite badly affected by some of the things I experienced while in the field	3.42	1.78	50.0
65	I think aid work puts a huge stress on personal, intimate relationships	4.36	1.34	23.7
66	I find it hard to feel the same about my relationships back home since aid work	2.78	1.49	65.0
67	I found it self-reassuring when I had an emotional reaction to events in the field	3.83	1.32	37.3
68	A lot of intimate relationships break up after field work	3.64	1.41	46.4
69	I feel angry with people in aid organizations who think there are easy solutions	3.91	1.51	43.1
70	I think debriefing after a mission is important	5.47	1.10	13.3
71	I think aid organizations should help aid workers' families understand the impact of aid work on family and relationships	4.42	1.48	20.0
72	I have had difficulty forming intimate relationships since my aid experiences	2.41	1.62	74.6
73	It seems to me that when organizations give you enough rope, you feel valued	4.42	1.29	18.6
74	I came back home and friends were just not interested in my experiences	2.88	1.46	64.4
75	Since going on mission I feel afraid of being on my own	1.82	1.23	86.7
76	I monitor any negative feelings I may have in the field	4.10	1.29	29.3
77	I find it difficult to share my aid stories with family and friends back home	3.41	1.74	48.3

| 78 | I find that aid work provides niches for all sorts of different people | 4.84 | 1.01 | 29.3 |
| 79 | I think aid work has propelled me on my way towards new challenges | 5.29 | 0.94 | 43.1 |

[1] Indicates the percentage who disagreed at least a little.

Table 2. 1 component solutions for the PostAID/Q on remaining 36 items (items listed in
        order of strength of loading)

36 items	Loading
64. I was quite badly affected by some of the things I experienced while in the field	0.75
28. I tend to block out all sorts of aid experience	0.68
36. I have been left with a lot of internal doubts from my aid work	0.68
6. I'm left with a lot of doubts about my contribution to aid	0.64
29. On mission I found there were times when I seemed to be going off the rails	0.64
30. I felt a sense of being personally eroded while on mission	0.61
24. Sometimes I feel that I just achieved nothing on mission	0.59
69. I feel angry with people in aid organizations who think there are easy solutions	0.57
32. I think a lot of aid workers end up quite badly affected by field work	0.57
18. I don't think aid work makes people more happy	0.55
48. Back home, if I start talking about events that happened in the field, I find people are desperate to get away from me	0.53
34. Sometimes I would suddenly act angry in the field	0.52
77. I find it difficult to share my aid stories with family and friends back home	0.51
66. I find it hard to feel the same about my relationships back home since aid work	0.50
67. I found it self-reassuring when I had an emotional reaction to events in the field	0.48
37. I feel undervalued by the organization that sent me on aid work	0.48
68. A lot of intimate relationships break up after field work	0.46
38. I tend to blame myself if things go wrong on mission	0.45
21. I feel very satisfied with the way my work has gone for me in the aid world	-0.45
4. While on mission sometimes I have felt shocked by my lack of empathy	0.45
59. I feel family members are not interested in what I did on mission	0.42
22. I have ended up with feelings of loss and sadness from aid work	0.42
39. When I spoke to my organization on return, they knew what had been happening for me in the field	
46. I think very emotive incidents while on mission can lead to guilt feelings	
74. I came back home and friends were just not interested in my experiences	
43. Being in the field works well when you manage your manager back home rather than them managing you	
16. I often felt bitter on mission that I couldn't do anything about many things I saw	
1. Since returning I prefer to be with people who have been on aid missions	
17. I often felt disgust that someone I saw in the field was reduced to such a	

terrible state
55. My contribution to aid work was valued when I got home
26. I feel that humanitarian aid work has not changed the person that I am
79. I think aid work has propelled me on my way towards new challenges
8. I try to take time to reflect about things that have affected me when in
the field
27. I've never met anybody who regretted ever having come near this field
of work
63. Post-mission I take time out to replenish myself
61. I had the support of a committed permanent relationship back home
while I was on mission

Only items that loaded >0.40 are shown

Table 3. Full factor matrix of the final 18 item *PostAid/Q* instrument with variance and
communalities explained.

Final 18 Items	Initial Eigenvalues			Extraction Sums of Squared Loadings			Rotation Sums of Squared Loadings			Commun-alities
	Total	% of Variance	Cumulative %	Total	% of Variance	Cumulative %	Total	% of Variance	Cumulative %	
1	5.88	32.69	32.69	5.88	32.69	32.69	2.65	14.72	14.72	.76
2	1.98	11.02	43.71	1.98	11.02	43.71	2.35	13.06	27.78	.57
3	1.62	8.10	52.71	1.62	9.00	52.71	2.32	12.87	40.65	.68
4	1.34	7.43	60.14	1.34	7.43	60.14	2.12	11.77	52.43	.75
5	1.11	6.14	66.28	1.11	6.14	66.28	1.96	10.91	63.34	.79
6	1.01	5.60	71.87	1.01	5.60	71.87	1.54	8.54	71.87	.82
7	.85	4.69	76.57							.65
8	.73	4.10	80.67							.76
9	.66	3.66	84.32							.75
10	.53	2.95	87.27							.77
11	.44	2.47	89.74							.84
12	.44	2.43	92.17							.76
13	.37	2.05	94.22							.61
14	.32	1.78	96.00							.56
15	.24	1.36	97.36							.67
16	.20	1.13	98.49							.70
17	.15	.83	99.32							.78
18	.12	.68	100.00							.71

Appendix 1: PostAID/Q © Author

Below are some statements made by humanitarian personnel following experiences in the field. Think about your own aid experiences and how they have impacted on you in regard to the following statements *over the last month*.
Please indicate how much you *disagree/agree* with each of the statements.

Place a CROSS in the box beside the question that describes your present agreement or disagreement with each statement.	Strongly Disagree	Disagree Some-what	Disagree Slightly	Agree Slightly	Agree Some-what	Strongly Agree
1. I was quite badly affected by some of the things I experienced while in the field						
2. I tend to block out all sorts of aid experience						
3. I have been left with a lot of internal doubts from my aid work						
4. On mission I found there were times when I seemed to be going off the rails						
5. I felt a sense of being personally eroded while on mission						
6. Sometimes I feel that I just achieved nothing on mission						
7. I feel angry with people in aid organizations who think there are easy solutions						
8. I don't think aid work makes people more happy						
9. Back home, if I start talking about events that happened in the field, I find people are desperate to get away from me						
10. I find it difficult to share my aid stories with family and friends back home						
11. I find it hard to feel the same about my relationships back home since aid work						
12. I found it self-reassuring when I had an emotional reaction to events in the field						
13. I feel undervalued by the organization that sent me on aid work						
14. I tend to blame myself if things go wrong on mission						
15. I feel very satisfied with the way my work has gone for me in the aid world						
16. While on mission sometimes I have felt shocked by my lack of empathy						
17. I feel family members are not interested in what I did on mission						
18. I have ended up with feelings of loss and sadness from aid work						