

Examining Job performance and Intrusive Thoughts on Humanitarian Workers in the Southwestern Region of Uganda

Mugisha Samuel¹, Enoch Oladunmoye PhD², Jacob Eneji Ashibi PhD³

¹Department of Applied Psychology, Kampala International University, P.O. Box 20000

²Department of Applied Psychology, Kampala International University, P.O. Box 20000, Kampala

³Department of Applied Psychology, Kampala International University, P.O. Box 20000, Kampala

Email: samuel.mugisha@kiu.ac.ug, enoch.oladunmoye@kiu.ac.ug, jacob.ashibi@kiu.ac.ug

Abstract— Humanitarian workers most of the time undergo psychological torture as they are always under pressure. Intrusive thoughts is another phenomena associated with such experiences and is defined as recurrent and unwanted cognitive intrusions that cause cognitive traffic jams. The present research therefore examines the effects of Intrusive thoughts in relation to job performance for humanitarian workers in Southwestern Uganda. This article reviews the literature on intrusive thoughts and job performance, and the factors that act as consequences of these phenomena, as well as preventive and alleviation measures for both phenomena.

I. INTRODUCTION

The humanitarian sector is inherently stressful due to the nature of crisis interventions, where workers are constantly exposed to trauma, loss, and human suffering. These stressors can take a severe toll on the wellbeing of humanitarian workers, making them particularly susceptible to intrusive thoughts defined as involuntary, distressing thoughts that disrupt normal cognitive functioning (By *Mapping the Degree of Chronic Stress and Sleep Disturbance Experienced to Other Ill Health Session 8 it is Argued Thatomprevalence*

AND RISK, 2024). Such thoughts are often a direct result of the workers' empathic engagement with the trauma of others. The cumulative impact of these intrusions leads to cognitive overload, characterized by an overwhelming amount of information and emotional content that workers are unable to process effectively. This overload impairs cognitive abilities such as concentration, memory, and problem-solving, thereby compromising decision-making skills and reducing task efficiency (Virgilio, 2024).

Failure to manage intrusive thoughts means that they are continuously present and this can cause burn out, which is a condition of physical and emotional fatigue that greatly impacts worker's productivity and efficiency while on the job and therefore negatively influences the efficiency of humanitarian organizations (Cooper, 2018). For example, the rate of absenteeism, provoked low morale, and neglect of responsibilities negatively affect the valuable tasks executed by the workers serving needy populations. These problems do not only shed the quality of people's lives but also worsen the inter group climate and augment the overall organizational stress (Willis et al., 2019).

In such places as Southwestern Uganda, where there is a massive presence of refugees and much humanitarian operation, recognizing the meaning of compulsory thinking is vital. Humanitarian workers for these areas are exposed to severe internal cognitive pressures in addition to coping with external pressure in the form of, logistical problems and

political turmoil. These can erode the ability of the workers to deliver basic services which are more enormated by effects of shortage of wellbeing provisions and poor coping mechanisms (Vella, 2022). Also, the study will explore ways of minimizing the impact of such thoughts on the workers..

II. MAIN BODY

Lokhande (2024), defines intrusive thoughts as any thought process that returns the unwanted theme at regular intervals and hinders the normal cognitive function. To humanitarian workers, it is understandable because these thoughts may appear as a psychological reaction to vicarious trauma that workers experience in crisis areas (Rizkalla & Segal, 2019). Workers, especially in stressful occupations like refugees and disaster areas, have also an elevated risk of developing intrusive thoughts, as the core of many daily tasks means facing human suffering, loss and violence (Henkelmann et al., 2020).

Due to these intrusions, the humanitarian worker can be overwhelmed with cognitive resources, and the cognitive ability to execute certain tasks such as decision making, problem solving, and self-regulation is reduced (Henkelmann et al., 2020). Kashdan & Rottenberg in their study found that owing to poor thought control, the humanitarian workers' productivity suffered and their perceived competence at work reduced considerably. Furthermore, because women are providing separate mental work in addition to the care of their families, stress over time increases, and feelings of burnout and decreased quality of life outside of paid work increase (Rajak et al., 2020).

It also emerges that intrusive thoughts not only impact on personal mental health of humanitarian workers but also also negatively impact on job performance (Foo et al., 2021). Chronicity of distress due to intrusive thoughts results in distractibility, poor ability to focus, task prioritization, and decision making. In essence, it implies that the delivery of services to the targeted susceptible communities is also reduced, which may have an influence on the success of operations in the humanitarian sector in general (Foo et al., 2021).

Moreover, the research find out that that mental stress arising from intrusive thoughts impact on interaction and interpersonal relationships within organizations. They may self isolate, have challenges with communication and cooperation with other workers, these all exacerbate the overall morale of the business (Foo et al., 2019). In a cross sectional, quantitative study on a sample of aid workers, Burnout emerged as significant with the frequency and intensity of Intrusions in a given week indicative of the high cognitive load on the job performance of humanitarian workers (Foo et al., 2023).

Some variables have been postulated which would attenuate the effect of intrusive thoughts on effectiveness in humanitarian organisations. For example, the findings reveal that social support can have a moderation role that minimizes the impact of load on cognition (Foo et al., 2023).

Self-esteem is also expected to exert a buffering effect to the relationship between intrusive thoughts and job performance. The higher self-esteem of workers makes them better to be alleviating distressed thoughts and improving speedily from periods of low productivity owing to stress since there is constant pressure (A New Decade for Social Changes, n.d.).

Another disclosure is that gender also determines how intrusive thoughts manifest and how they are dealt with in people. Available literature has pointed out that women workers involved in humanitarian operations might be more prone to the emotional effects of trauma than males and are likely to have more intrusive thoughts than men, which would worsen the effect on job performance (Søegaard et al., 2021).

Therefore, the humanitarian organizations require interventions that can address these intrusive thoughts as well as the cognition overload. In this case, stress management training is the most commonly implemented type of training with high effectiveness. Mindfulness, emotion regulation, and cognitive behavioral intervention programs enable the workers give different perspectives to the distressing thoughts hence minimizing their effect on the mental health of the individuals (Glomb et al., 2015).

Also, increased availability of mental health services is vital for the population under question. Counselors, briefers, and psychological support should be provided by mental health workers as and when required. Further efforts could be made to ensure an organisational mental health culture that addresses intrusive thoughts and encourages a threat response system check in at work periods, and trauma informed leadership could improve upon reducing the impact of intrusive thoughts on job performance even more (Wu et al., 2021).

Culture is one of the biggest factors that can be employed to moderate the impact of cognitive overload. In ensuring that professionals embraced in humanitarian work accept their mental health issues, humanitarian agencies may support the cause and ensure the accused workers are not penalized when treated (Stevens et al., 2022). Promoting peer support systems alongside offering information about mental health is proactive measures which develops a strong willed workforce that may withstand pressures that comes with being humanitarian worker.

Although, the current literature has offered useful findings concerning the link between intrusive thoughts and job

performance, there is a research gap that needs to be filled. The longitudinal Investigations could enhance an understanding of how these intrusive thoughts change with time and recognize the symptoms of burn out. Furthermore, there is a need for culturally tailored Intervention in prevention research. But humanitarian workers are all types of people and the Psychological tools and support systems that would help one person would not necessarily help another (Stevens et al., 2022).

More targeted approaches that signify the various organizational, cultural and social environments of the workers in various humanitarian organizations could improve the interventions' performance and, consequently, decrease the negative impacts of cognitive load on the workers. A deeper analysis of the sex differences in intrusive thoughts in humanitarian workers is also necessary because these differences may affect the workers and cognitive-emotional load (Working Conditions in a Global Perspective, n.d.).

III. RELATED LITERATURE

High stakes and critical incidents have been investigated with reference to intrusive thoughts and to the experience of cognitive overload, in relation to the task, within the sphere of human occupations and risky occupations. The humanitarian worker lives in an environment full of stress and is exposed to trauma hence being at par with unique psychological challenges. The first empirical investigations of vicarious trauma and how it presents as intrusive thoughts in workers were carried out by (Zaccari, 2017). In these studies, one found that the cost of compassion, or becoming overwhelmed by the traumatic experiences one encounters, results in intrusive thoughts and cognitive overload, which negatively affects job performance.

In humanitarian work where suffering is often encountered repeatedly intrusive thoughts might become more frequent causing cognitive burnout and emotional exhaustion among the workers (Protection et al., n.d.).

Mercado (2017), revealed that diverse mental problems, such as intrusive thoughts, in humanitarian workers reduce the efficiency of their operations and the ability to make decisions. Such mental health problems are associated with reduced performance, high turnover rates, and problems with interpersonal relations among teams.

There has also been accumulated literature targeting moderator variables such as social support and self esteem. Escalera et al. (2019), pointed out that social support is instrumental in minimizing the impact of intrusive thoughts. The respondents who received strong peer support and organizational resources were more protected against cognitive overwhelm that is inherent to vicarious trauma. Escalera et al. (2019), further distinguished self esteem as the mediator in the relationship with intrusive thoughts in patients. Research has revealed that self-esteem is positively related to affect and cognitive resources, low self-esteem workers exhibited more distress in dealing with further emotional demands.

Moreover, gender differences have been explored in the literature, with studies indicating that female humanitarian workers might experience higher levels of intrusive thoughts

and associated stress (Søgaard et al., 2021). Possible reasons for this are the difference in social roles and stress management that male and female workers from high stress contexts follow.

IV. METHODOLOGY

This study used both qualitative and quantitative research to gain an overall picture of the effects of intrusive thoughts on humanitarian workers in South Western Uganda. It involved both structured and unstructured data collection methods to afford a richer understanding of the phenomenon in consideration.

The quantitative component included the completion of prescribed surveys with Quantitative structured questions that were developed to assess the frequency, the intensity, and emotions relating to Intrusive thoughts in the participants. To measure the severity of these cognitive intrusions, the study engaged the application of the Impact of Event Scale Revised (IES-R) a widely used tool that evaluates trauma related symptoms in high stress situations Krupelnytska & Yatsenko,(2024). Using this instrument, information regarding the frequency and nature of intrusive thoughts was received, which closed the gap for making fair comparisons across demographic variables. Further, it was conducted during the survey to gather data regarding the participant's demographic and occupational background including their job role, time spend in stressful or traumatic setting, and previous history of trauma (Id et al., 2023). These variables made it possible to search for tendencies and associations between individual and occupational characteristics and intrusive thoughts presence.

The qualitative part amplified the quantitative data through the use of semi structured interviews and focus group discussions.. These methods allowed participants to extend themselves and their experiences as well as gain ideas on how to react to intrusive thoughts. Thus, the study was able to document the richness of experiences that could hardly have been captured, let alone, interpreted with the help of survey data resources, for instance, the social cultural organisational factors that influenced participants' state of psychological health.

The combination of quantitative and qualitative analysis ensured that findings are crosschecked and validated adding to the methodological credibility of the study. Thus, this mixed-methods approach provided a conceptual map for examining the interactions between the person, occupation, and environment of intrusive thoughts in humanitarian staff.

V. LIMITATIONS OF THE STUDY

One of the key limitations is the potential lack of a sufficiently large and diverse sample size. The study focuses on workers in specific humanitarian organizations, which may limit the ability to generalize findings to all humanitarian workers globally. Research conducted in other regions or among different types of humanitarian agencies might yield different results due to contextual differences (Article, 2023).

The reliance on self reported data may introduce biases, including social desirability bias and inaccurate recall of intrusive thoughts and job performance challenges. Workers may underreport distressing thoughts due to fear of stigma or

professional repercussions, or they may over report to meet perceived expectations of researchers (Eyllon et al., 2020). Future studies could incorporate objective data, such as performance evaluations or physiological indicators of stress, to provide a more comprehensive assessment.

The effectiveness of interventions designed to mitigate intrusive thoughts and cognitive overload is highly dependent on cultural contexts. The study's focus on Southwestern Uganda highlights the unique challenges faced by workers in this specific region, but interventions that work well in Uganda may not be equally effective in other cultural settings (Razzak et al., 2019).

Although the study considers the impact of gender on intrusive thoughts, it may not fully capture the nuances of how gender interacts with other factors, such as age, background, and experience. There is a need for more focused research on gender differences in coping strategies, emotional resilience, and social support within humanitarian settings (Naz et al., 2017).

The lack of delay data limits the objective of analyzing severe, intrusive, and obsessive thoughts among workers after a long period to determine their consequences. A longer period will further allow monitoring the change in such thoughts in terms of their constant influence on the mental health and work productivity (Hogstedt et al., 2023).

VI. FINDINGS OF THE STUDY

This study establish that individuals who engaged in humanitarian works are significantly affected by intrusions, bulk of the respondents rating their intrusions as frequent, distressing and involuntary that they were triggered by traumatic events that humanitarian workers experience in their line of duty. Most of these thoughts were correlated with feelings of pressure and caused mental burnout that reduced the ability to complete tasks at work. This is well supported by prior research concerning the devastating consequences of vicarious traumatization and cognitive stress among professionals working in stressful areas (Zaccari, 2017).

Interference was positively correlated with poor performance with the following observations made, the identified subjects complained of poor decision making skills, poor problem solving skills and low work productivity. Some of the workers who reported high cognitive workload had issues to deal with the mental requirements of their jobs, resulting in performance declines and at times, long term absenteeisms (Meyer & Hünefeld, 2018). Tsirimokou et al. (2023), emphasized the stress associated with the challenging and multifaceted nature of professional roles in trauma-related occupations.

The study especially underlined the issue of social support as a factor that lessens adverse impacts of intrusive thoughts. The sub finding on social networks revealed that employees who could call on robust intra and extra organizational support had significantly reduced cognitive overload and superior mental health. Besides, workers' ability to find peer support, organizational resources, and psychological counseling as factors that helped them manage the emotional and cognitive aspects of their work (Osborne & Hammoud, 2017). Type et al.,

(2024) pointed out that social support had moderating role in mitigating vicarious trauma symptoms

This study postulated that self-esteem in the workers would act as a buffer to intrusive thoughts and effectiveness on the job. By sex, female employees indicated elevated osmosis and self-reported scores for intrusive thoughts and depressive symptoms than males, and the study corroborates the notion of sexual differential vulnerability to trauma among aid workers (Mengelkoch & Slavich, 2024). This is in concordance with other findings which suggest that women in humanitarian environments are at a higher risk of experiences emitting and psychological pressure (Camey et al., n.d.).

The study identified a great need for organizational solutions, specifically to combat workload and its effects on the performance. To prevent humanitarian workers from experiencing cognitive overload, suggestions such as stress management training, trauma informed leadership and insurance access to mental health services were made. This concurs with the suggestions by Salama et al. (2022), who indicated that sufficient organizational support is crucial in preventing the impacts of stress and burnout among workers in high-stress careers.

Finally, the presented research calls for increased attention to intrusive thoughts and cognitive overload in the humanitarian field. Promising strategies include increasing social support, promoting the use of protective factors that and protective factors through self-esteem programs, and incorporating trauma informed approaches that will protect the health of workers on the front line of these emergencies.

VII. DISCUSSION

In this regard therefore, the present study supported previous findings of increased vicarious trauma in humanitarian workers in Southwestern Uganda, a stressful population. The present study suggests that both bystander stress and vicarious trauma have a strong negative impact on performance. The negative correlation between intrusion and job performance as seen in the current study was established, and this agrees with earlier studies that have established that vicarious trauma impacts the efficacy of workers in high-stress fields (Quimby, 2021).

The occurrence of intrusive thoughts in identified humanitarian workers is concurrent with findings that professionals in trauma exposed labor force are prone to develop symptoms that are almost similar to PTSD. These intrusive thoughts typically appear as flashback, excessive worry and rumination about the victims they come across, which cognitive load and impair concentration on everyday task (Koll et al., 2020). This discovery is especially for humanitarian organizations where employees might have to go and make those kinds of decisions that are going to cost the lives of people especially in emergencies. Some of the common signs that people with intrusive thoughts exhibit include poor decision making, employers and employees' fatigue, and workers and their organizations productivity loss (Rožman et al., 2019).

Another significant outcome of the present research is the role of social support in the context of moderator on the impact of intrusive thoughts. This research established that

humanitarian workers that had a positive network of social support especially from fellow workers and the organization had reduced stress and emotional burnout. This finding concurs with previous studies that have posited that social support moderates the impact of trauma filtering (Sledjeski & Delahanty, 2014).

Workers with higher self esteem were better able to cope with emotional and cognitive challenges, which may be attributed to their ability to process and regulate stress more effectively. This finding is consistent with the literature on resilience, which identifies self-esteem as a key factor in how individuals respond to stress and trauma (Li et al., 2023). Additionally, the study found that gender played a role in how intrusive thoughts affected job performance, with female workers reporting higher levels of distress than their male counterparts. Gendered differences in trauma response have been documented in several studies, with women often experiencing higher vulnerability to emotional distress in humanitarian settings (Jarallah & Baxter, 2019).

Finally, the study calls attention to the urgent need for targeted interventions aimed at reducing cognitive overload and mitigating the impact of intrusive thoughts. Interventions such as stress management training, trauma-informed care, and mental health support services can significantly improve the well-being of humanitarian workers, thereby enhancing both individual job performance and overall organizational effectiveness (Mindfulness & Techniques, 2023). These results highlight the necessity of creating a more comprehensive and culturally appropriate local approach for mental health intervention that may target complex stressors encountered by humanitarian staff in austere settings, such as the Southwestern Uganda.

VIII. CONCLUSION

The study explores the intricate relationship between intrusive thoughts, and job performance among humanitarian workers, emphasizing how these factors intersect to influence professional functioning in high stress environments. It highlights the profound impact of vicarious trauma, a phenomenon where exposure to others' traumatic experiences leads to psychological distress, impairing cognitive and emotional functioning. Recognizing the multifaceted nature of this challenge, the study underscores the critical role of organizational interventions, such as training in stress management, structured debriefing sessions, and policies that prioritize mental health.

Additionally, it emphasizes the value of robust social support systems, both within the workplace and in personal networks, to buffer the negative impacts of stress. Self esteem building programs are also identified as essential tools to empower workers, fostering resilience and enabling them to maintain productivity despite challenging circumstances.

Therefore, it is recommended that following up research should be used to investigate long-term causality of intrusive thoughts impact on job performance in order to offer a better understanding of the route. Furthermore, the development and evaluation of culturally tailored mental health interventions are necessary to ensure relevance and effectiveness across diverse

humanitarian settings. By proactively addressing these challenges, humanitarian organizations can foster a supportive work environment, enhance workers' psychological well-being, and strengthen their capacity to deliver critical services in crisis affected areas. This approach is pivotal in ensuring the sustainability and effectiveness of humanitarian efforts in addressing global emergencies.

IX. RECOMMENDATIONS

It being the case that social support acts as a buffer against the effects of intrusive thoughts humanitarian organizations should give more attention in establishing efficient networks. This includes facilitating peer support groups, promoting open communication, and ensuring access to professional counseling services. Strengthening support systems can help workers process their emotional distress and reduce the cognitive overload associated with vicarious trauma (Howlett & Collins, 2015). Peer support and team-based interventions have been shown to buffer the negative effects of stress and improve overall well-being in high-risk professions (Iype & Aithal, 2024).

Organizations should integrate stress management and resilience building programs into their regular training schedules. These programs could include mindfulness practices, relaxation techniques, and cognitive behavioral strategies to help workers cope with intrusive thoughts and emotional distress. Building resilience through these programs can enhance workers' ability to manage the cognitive load associated with their jobs and improve their long-term mental health (Lamb & Cogan, 2016). Research has demonstrated that such interventions significantly reduce burnout and promote better performance among humanitarian workers (Foo et al., 2023).

It is essential for humanitarian organizations to offer accessible and confidential mental health services to their workers. This includes providing access to trauma informed care, counseling, and therapy for those struggling with intrusive thoughts and PTSD like symptoms. Mental health support should be a cornerstone of organizational policy, ensuring that workers can address their mental health needs without fear of stigma. Such initiatives not only support the mental well-being of workers but also enhance their cognitive function and professional output (Randall, 2023).

Since self-esteem was revealed as a potential moderator to the relationship between intrusive thoughts and the levels of job performance, organizations should focus on programs that would enhance self-esteem and empowerment among workers. Training focused on building personal resilience, leadership skills, and positive self identity can help workers cope better with the psychological demands of their roles. Self esteem interventions have been linked to improved coping strategies, lower stress levels, and enhanced job performance in various high-risk sectors (Can et al., 2020).

Further investigation should be carried out using survey research designs in order to establish the long term impacts of intrusive. concerning job performance and mental status of the employee or worker.. This research should also explore culturally tailored interventions, as the unique cultural context

of Southwestern Uganda may require different approaches to stress management and mental health support compared to other regions. Culturally appropriate strategies will enhance the relevance and effectiveness of interventions for local workers (Jongen et al., 2018).

Humanitarian organizations in Southwestern Uganda can enhance support for their workers by implementing targeted recommendations to promote mental well-being and improve job performance in crisis situations. These measures will foster a healthier and more resilient workforce, better equipped to handle the complexities of humanitarian operations.

According to Pearlman and Saakvitne (1995) and Schmidt et al. (2021), organizations must adopt proactive strategies, including stress management programs, strengthened social support systems, and customized mental health services. These interventions are vital for ensuring both the well-being of workers and the effectiveness and sustainability of humanitarian efforts. Further studies should involve genetically based research designs to capture how intrusive thoughts and derived culturally appropriate strategies that can be implemented in the different regions. By addressing these priorities, humanitarian organizations can safeguard worker mental health and maintain their ability to provide critical services in challenging environments.

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