The Hague Humanity Hub

A Culture of Sacrifice

Mental Health and Wellbeing in Mission-Driven Organizations

INTRODUCTION

‘A culture of sacrifice.’ These were the words used by one respondent when asked about the state of mental health (MH) within mission-driven organizations. Such reflections capture a broader concern that continues to shape the experiences of many working across this sector, a sentiment that formed as a starting point for The Hague Humanity Hub’s Mental Health and Wellbeing Survey.

With the intention of exploring how MH is understood, experienced, and supported within such organizations, the survey has sought to shed light on the emotional, psychological, and structural pressures that shape the work and personal lives of many in this sector.

Drawing on perspectives from individuals across sectors and organizational levels this survey has not only provided an overarching overview of MH perceptions, practices, and available resources, but identified critical gaps and the variations in MH support within and between various sectors of this ecosystem as well.

The responses, collected from approximately **130 respondent**s across various organizations, provide a nuanced overview of the current state of MH within the mission-driven sector. While reflecting a growing awareness within the broader ecosystem regarding the pervasiveness of MH-related challenges, the findings also paint a candid picture, highlighting the failure to translate many of these concerns into concrete and effective action, a sentiment underpinned by the prevailing assumption that the purpose garnered from mission-driven work will be sustainable.

The survey findings, however, suggest a more complex reality. At a time of unprecedented funding cuts, digital transformation, and growing legal and political pressures faced by this sector across the world, the assumption that purpose alone can ensure wellbeing and sustainability appears increasingly untenable. On the contrary, the findings highlight the need to ensure that those working at the front lines are equipped not only to carry out their work effectively, but to safeguard their own MH and wellbeing as well.

The findings are intended to inform a series of initiatives, including an expert dialogue, that will critically reflect on the sector’s ways of working and identify practical tools and guidance that can help strengthen MH support.

SCOPE OF ORGANISATIONS SURVEYED

Category	Count	% of total response
Non-Governmental Organisation/Civil Society Organisation (NGO/CSO)	34	26.20%
International Non-Governmental Organisation (INGO)	24	18.50%
International Intergovernmental Organisation (IGO)	15	11.50%
Professional Service Provider/Consultancy	10	7.70%
Social Enterprise	9	6.90%
Network/Hub/Alliance	8	6.20%
For-profit company / private sector organisation	5	3.80%
Foundation/Philanthropic Organisation	5	3.80%
Startup / Early-stage venture	4	3.10%
Educational Institution	3	2.30%
Research & Policy Institute	3	2.30%
Governmental Organisation	2	1.50%
Art, Culture & Heritage Organisation	2	1.50%
Embassy/Consulate	2	1.50%
Other (Mental Health non-profit, Consultancy, Media, Court/Tribunal)	4	3.10%

ORGANISATIONS SIZE

Size	Count	% of total
Small	72	55.3%
Medium	27	20.7%
Large	31	23.8%

LEVEL OF SENIORITY

Role level	Count	% of total
Executive / Senior leadership	38	29.2%
Management / Team leadership	25	19.2%
Mid-level professional	31	23.8%
Early-career / Junior	34	26.2%
Other	2	1.5%

TYPE OF EMPLOYMENT

Type	Count	% of total
Permanent	65	50%
Temporary	28	21.5%
Intern / Trainee	18	13.8%
Other	19	14.6%

THE PARADOX OF MISSION-DRIVEN WORK

The paradoxical nature of mission-driven work remains its most prominent feature. For many, the sense of purpose they gain from their work continues to provide considerable personal and professional fulfilment, serving as a source of motivation and resilience. Our survey findings confirm this dynamic with **65%** of respondents reporting the positive impact their work has on their MH. While reflecting the widely held belief regarding the moral and ethical satisfaction garnered from mission-driven work, this sentiment also hides a more complicated reality, fueling the notion that sacrifices are, in the words of one respondent 'a side effect of the job we all live with.'

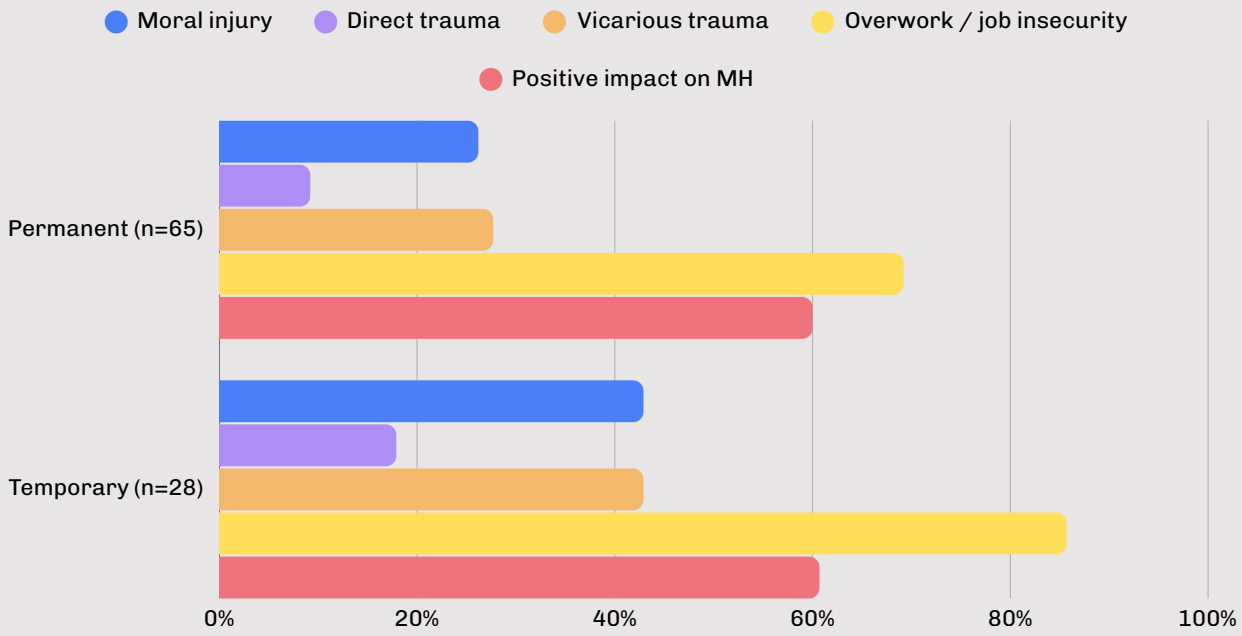
This caution is not without cause as most respondents also identified a range of factors that negatively impacted their MH, the most significant of which were overwork and job insecurity (**71%**). This is supplemented by the prevalence of moral injury (**30%**), vicarious trauma (**28%**), and isolation (**22%**) which respondents identified as major factors negatively impacting their mental health.

Specifically, IGOs (International Intergovernmental Organizations) and temporary staff stand out as outliers as most of their respondents consistently highlighted, more than any other category, the various ways their MH was being negatively impacted. For example, **43%** of temporary staff reported to have experienced moral injury – an outcome of conflicting personal and organizational values – a stark contrast to **26%** of permanent staff who responded as such. A possible explanation for this could be the limited amount of influence and autonomy temporary workers have in shaping workplace decisions, resulting in them having to carry out tasks that may conflict with their values. These findings showcase broader challenges associated with precarious employment as illustrated, as exemplified by almost **86%** of temporary staff who identified overwork/job insecurity as a primary factor that negatively impacted their mental health.

The concerns are no less grave for those in the IGO sector as **40%** of respondents identified moral injury and direct trauma (**20%**) as a significant factor that negatively impacted their MH. In comparison to NGOs (Non-Governmental Organizations) (**26%** and **2.9%** respectively) these figures suggest a greater exposure to not only ethical tensions, but traumatic experiences as well.

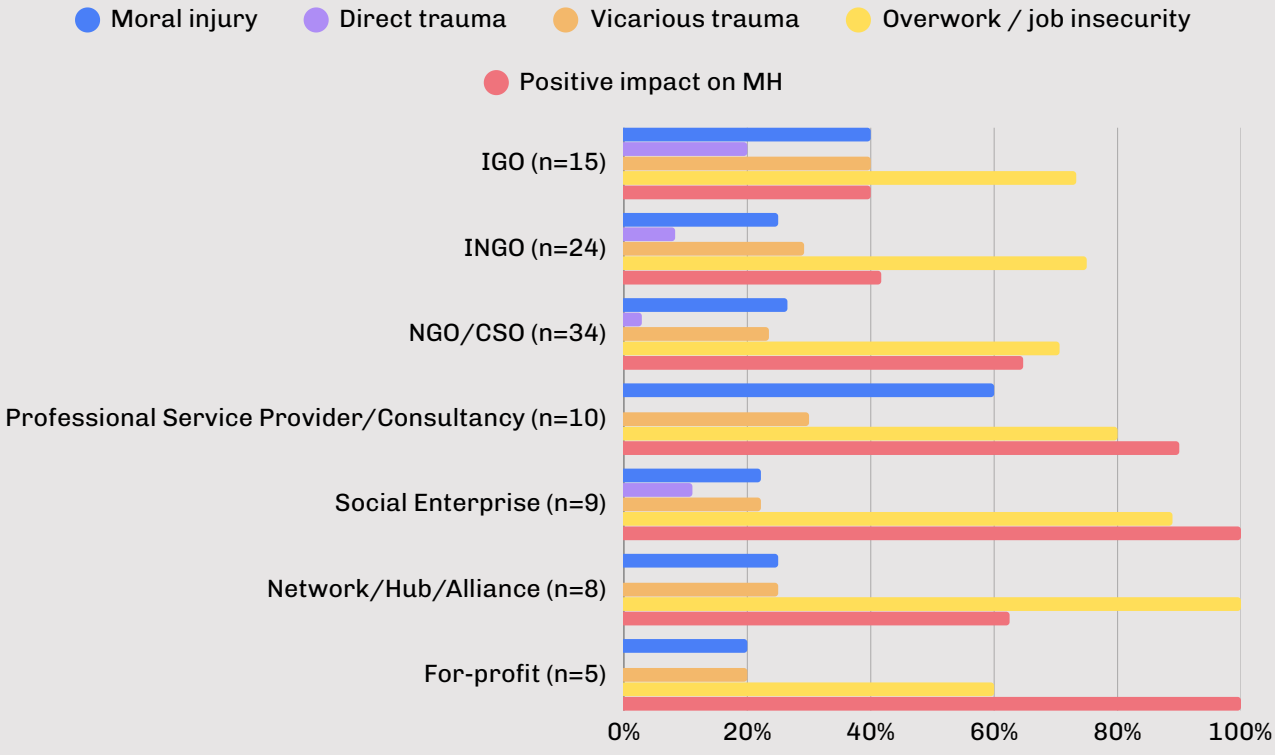
Impact of work on mental health

Comparing permanent and temporary roles



Impact of work on mental health

Comparing organisations types



These findings highlight not only the increasing distress many experience when their organizations are misaligned with their ethical and moral ideals, but the additional pressures that come from precarious working conditions as well. As such, the results indicate that the challenges and pressures experienced by professionals in mission-driven organizations may not be psychological alone but rooted in organizational and structural conditions as well, suggesting that meaning and purpose alone may not be sufficient enough to offset these challenges.

INCREASING AWARENESS OF MENTAL HEALTH IN MISSION-DRIVEN ORGANIZATIONS

Mission-driven organizations commonly operate on the frontlines of humanitarian, social development, and public welfare challenges, often in contexts characterized by limited resources and growing demand. Despite the critical role they play in addressing such complex societal issues, the emotional and psychological pressures they experience have historically received limited attention, a trend that has recently begun to shift as confirmed by the survey results elaborated upon below.

These survey findings reflect this growing trend with **67%** of respondents reporting a moderate or high level of awareness regarding MH concerns across the sector. Despite the caveats elaborated upon below, this finding remains important as it indicates the growing recognition within various mission-driven organizations regarding the need to engage in conversations around addressing the challenges of MH in more visible ways than before.

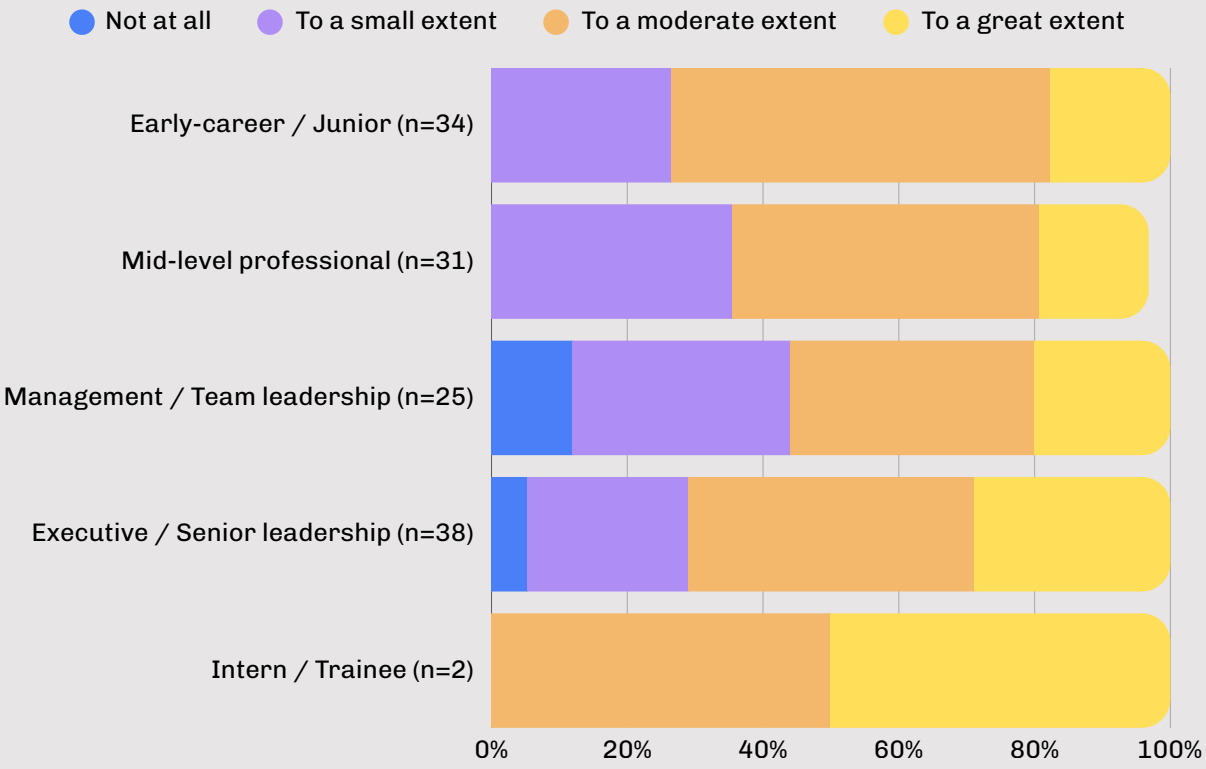
These results, however, are not to be taken at face value as a closer look at the differences between sectors and those in varying positions within their organizations indicates revealing discrepancies. This is most clearly seen in the IGO sector where over **53%** of respondents indicate a low level of awareness regarding MH issues. While the relatively small sample size requires caution, it nevertheless highlights an area that deserves further investigation.

When it comes to respondents at a managerial level, the picture is more ambiguous as there is an even divide between those who reported a low (**32%**) and a moderate (**36%**) level of awareness. This ambiguity, however, is later clarified when considered alongside the finding that **40%** of managers reported a limited organizational recognition regarding the emotional strain associated with their work.

Overall, these findings suggest a defining theme of this survey: awareness alone is not sufficient.

Awareness MH is an important workplace issue

By seniority of respondents



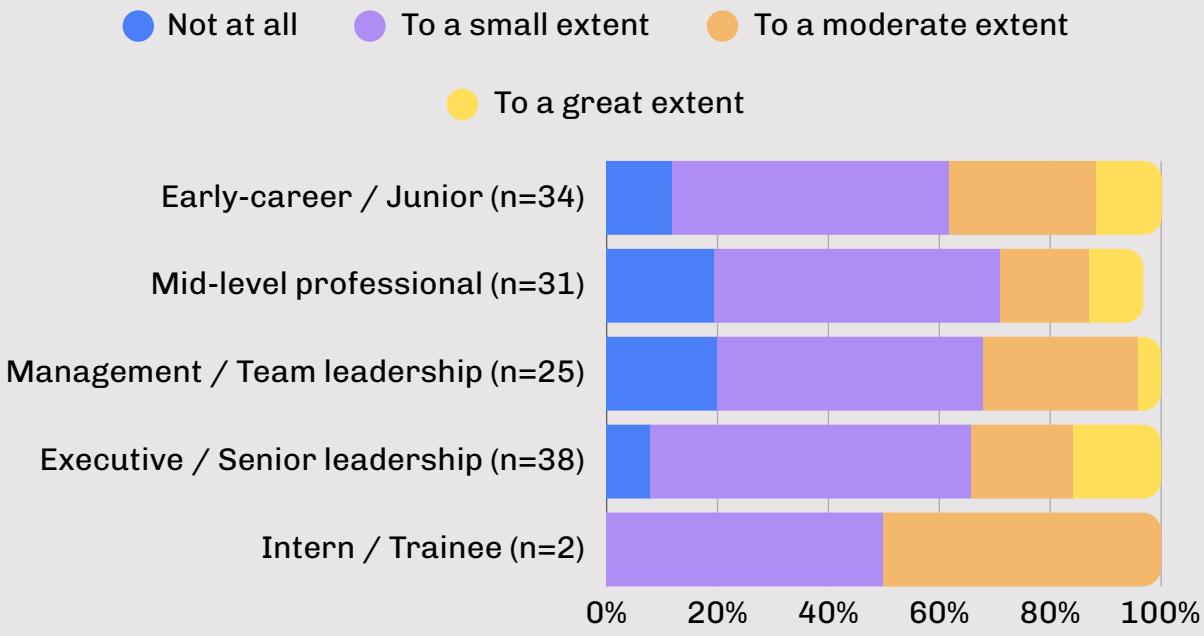
RECOGNITION WITHOUT ACTION

Despite the growing awareness of MH challenges reported across the sector, concerns remain regarding the extent to which this recognition has translated into accessible and embedded support structures. In fact, nearly **50%** of all respondents explicitly highlighted the insufficient attention paid to MH in their sector and organizations. The reasons for this appear to be both structural and organizational in nature.

Structurally, more than half of all respondents across all categories highlighted limited availability of mental health resources as a significant challenge. This limitation is particularly severe in the NGO sector and at the managerial level where over **20%** of respondents reported having no MH resources available to them. Interestingly, resource constraints were not confined to the non-profit sector as they also impacted those in for-profit industries as well, highlighting the pervasiveness of this problem.

Availability of MH resources / support

By seniority of respondents



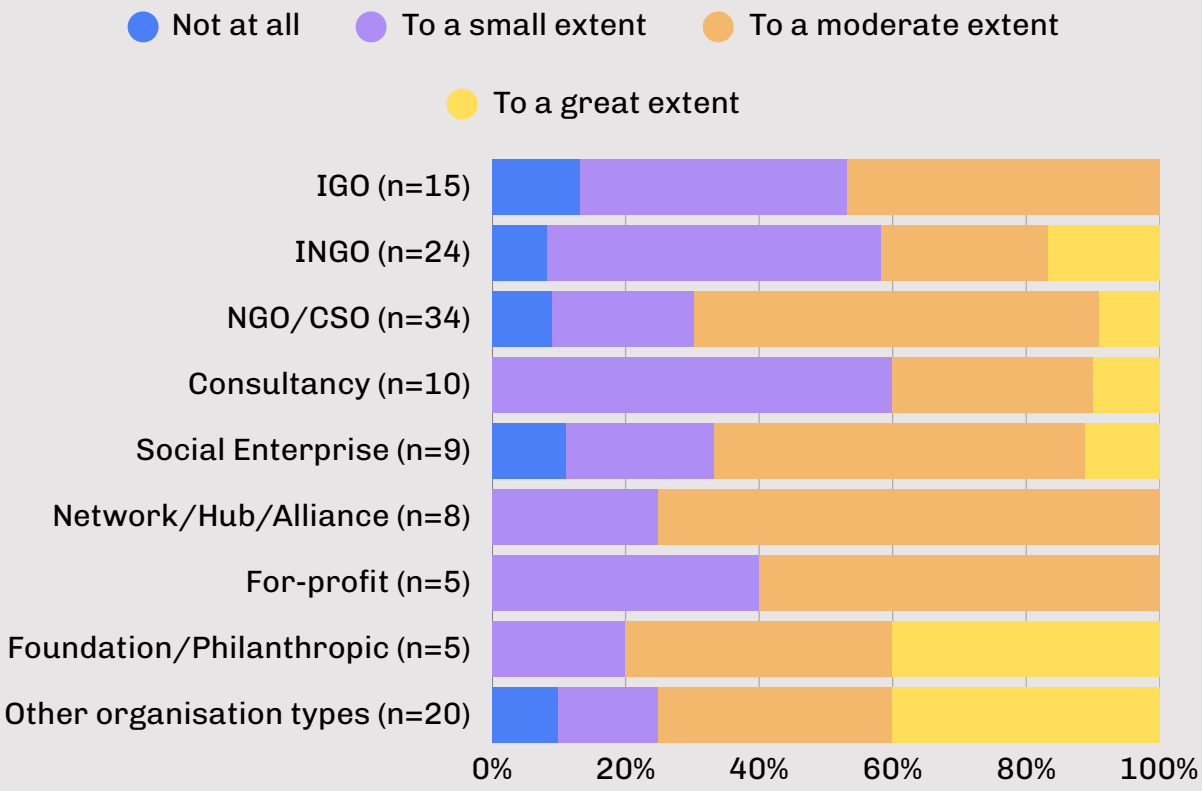
Concerningly, **23%** of respondents revealed they had little to no knowledge when it comes to the resources that are available to them, indicating not only a resource gap but a communication and priority one as well. This is further supported by respondents' perceptions of organizational support, particularly regarding leadership attention to wellbeing and efforts to reduce stigma around mental health challenges.

In both IGOs and INGOs, for example, over **40%** of respondents reported low levels of leadership attention to their wellbeing, while over **50%** of respondents in both sectors highlighted the little effort made to reduce stigma. These figures stand in stark contrast to responses from NGOs where **60%** indicated a moderate level of leadership attention to wellbeing.

Nonetheless, across all sectors and organizational levels efforts to reduce stigma remains a recurring issue with **56%** of respondents highlighting the little effort made by their sector to address this concern.

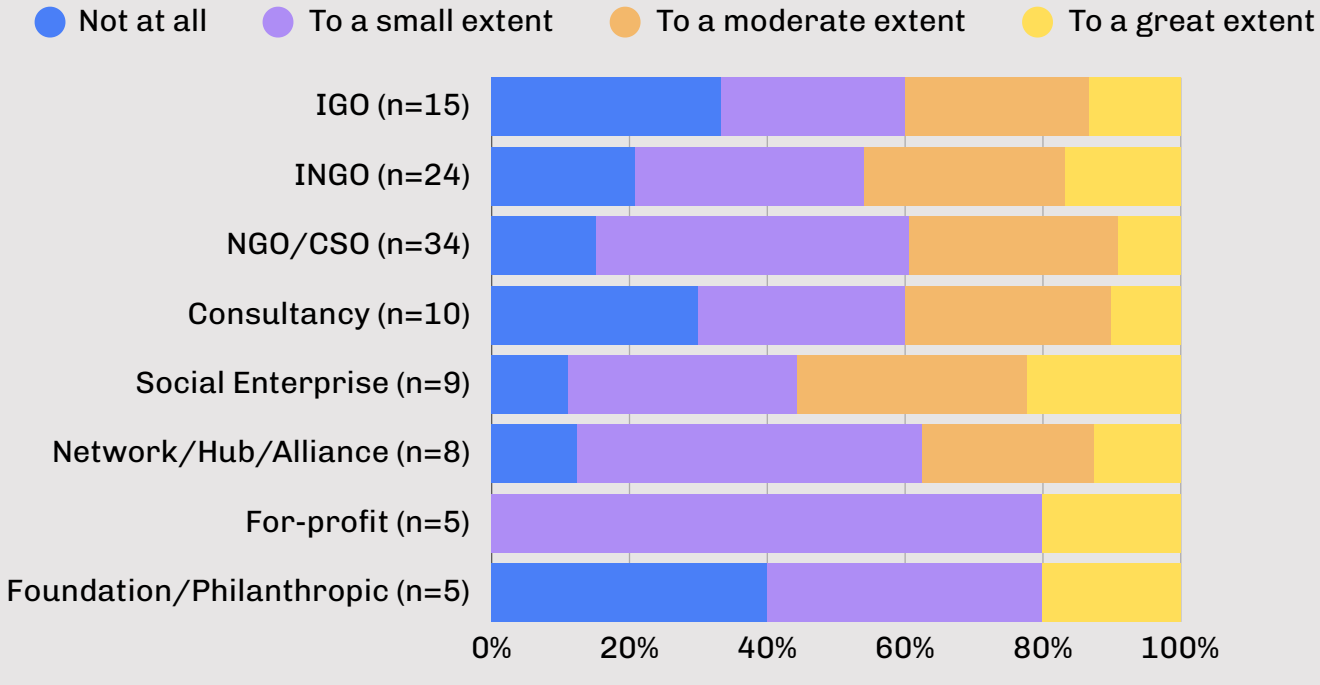
Leadership attention to staff wellbeing

By organisation type



Efforts to reduce stigma around MH

By organisation type



The interrelationship between the various factors highlighted above indicate that MH support, rather than being a part of streamlined and integrated organizational practices, remains fragmented and reactive, dependent on individual leaders and shifting organizational capacity. The issue is thus not only a concern over resource – though that remains a significant challenge – but also one of organizational culture where the commitment and sense of purpose of employees is, intentionally or otherwise, leveraged in order to justify emotionally and psychologically taxing labor, a sentiment best summarized by one of our respondents as follows:

> ***"The belief that commitment to a mission naturally sustains people still lingers, sometimes obscuring the daily emotional labor and blurred boundaries that accompany the work. As a result, mental health is often treated as an individual resilience issue rather than something shaped by organizational culture, leadership choices, and structural expectations.***

FRAGILE CULTURE OF SAFETY AND OPENNESS

A culture of openness and psychological safety is essential to effectively translate awareness into effective action. Beyond the availability of resources, our survey findings raise broader questions regarding the extent to which employees feel safe discussing MH in their respective organizations. However, respondents' insights paint an ambiguous picture as perceptions of psychological safety were relatively divided, with only **52%** of respondents reported feeling safe discussing MH in their workplace.

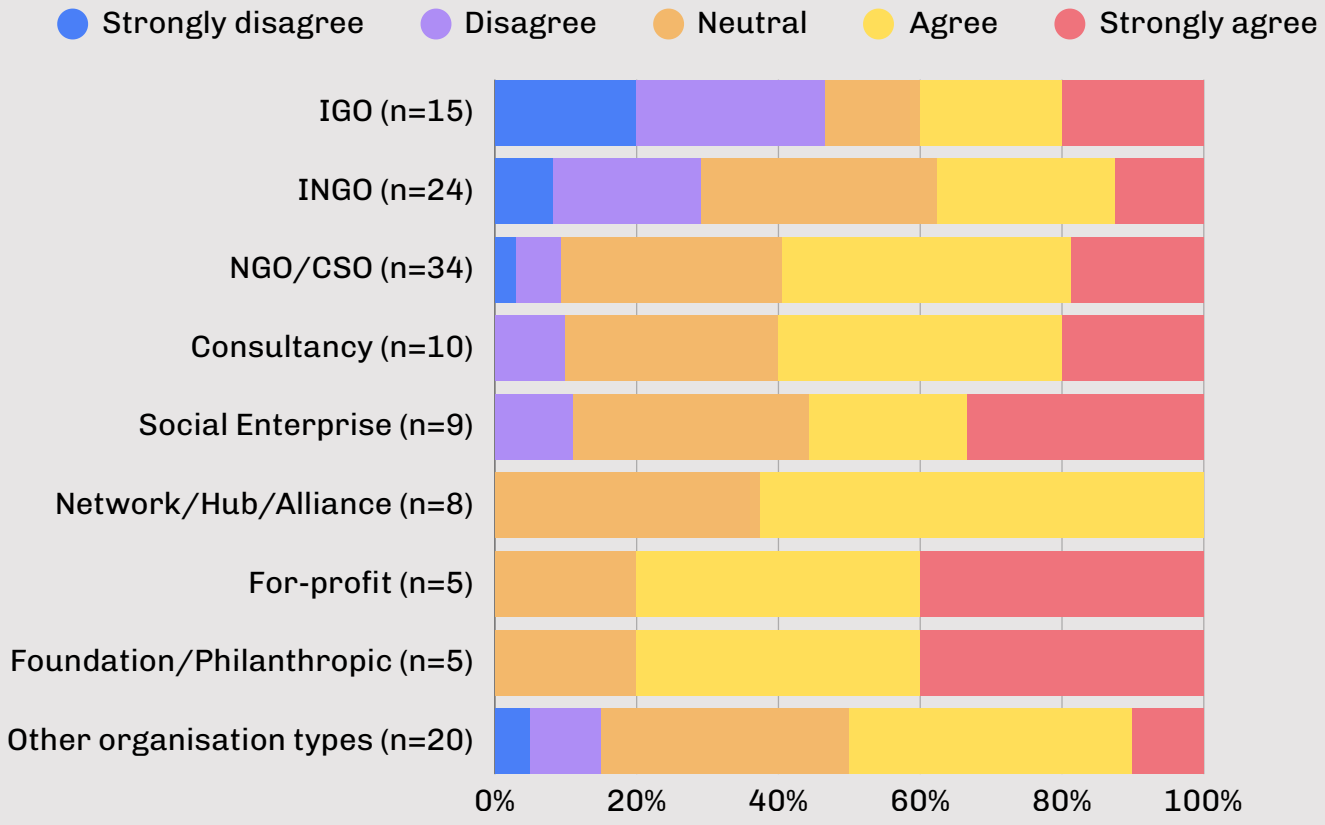
When conducting a deeper analysis, however, differences are particularly notable between different sectors and sizes of organizations. Nearly **25%** of IGOs, for example, indicated feeling moderately unsafe while over **6%** of NGO respondents reported as such. Similarly, nearly **40%** of employees at large sized organizations indicated feeling moderately or very unsafe in discussing these matters while almost **60%** of employees at smaller organizations felt moderately or very safe.

However, this isn't only a matter of size as (job) security also plays a role, something that is particularly evident in the contrast between temporary and permanent staff. While almost **60%** of permanent staff felt safe or extremely safe in engaging in these discussions, the number was much lower for temporary staff as only **32%** indicated as such. The disparity is more pronounced when focusing on those who reported feeling unsafe or extremely unsafe, with the proportion among the temporary staff being more than double (**39%**) that of permanent employees (**9%**).

These findings notably highlight a divergence between general sentiment and lived experiences. Despite its increasing visibility in mission-driven organizations, MH continues to be recognized in rhetorics only. The possibility of its integration into the long term and structural foundations of such organizations' is even more doubtful for those with temporary contracts where job insecurity is more pervasive, as well as those in large organizations with more complex and formalized hierarchies and bureaucratic structures.

"I feel safe discussing MH concerns"

By organisation type



EXISTING RESOURCES AND THEIR LIMITATIONS

In addition to the concerns of professionals in mission-driven organizations, the findings of the survey also reveal the existing resources provided as well as their limitations. The most frequently identified resources utilized by organizations include:

- Mental health and wellbeing webinars or trainings (32.6%);
- Flexible working arrangements (32.6%);
- Counselling or therapy access (21.7%);
- Mental health contact persons or advisors (16.3%);
- Internal check-ins (15.5%)

A segmented analysis reveals that webinars/trainings were more prevalent in IGOs and large sized organizations (**56% and 58% respectively**), that the for-profit sector preferred internal check-ins (**40%**), and small sized organizations frequently utilized flexible working arrangements (**34%**) as part of their MH resources. The extent to which these resources are effective is a question best answered by examining the types of resources respondents claimed to use out of their own volition. In this regard, meditation/mindfulness (**43%**) and therapy (**39%**) ranked as the most preferred resources.

More revealing, however, was the low portion of respondents who reported using the resources most readily available to them within their organizations. One possible explanation is that the presence of such resources in the workplace ensures that employees would not need to seek it out externally. Alternatively, the low reported usage may also reflect perceptions of their limited utility, an argument best supported by the low proportion of IGO respondents (**25%**) who reported to have used the most available resource in their organizations, namely webinars/trainings, in comparison to the more than **55%** of respondents who engaged in meditation/mindfulness practices.

Moreover, **47%** of IGO and **29%** of NGO respondents revealed their lack of knowledge regarding these resources, a stark contrast to **7%** of respondents in for-profit sectors who answered this way. This lack of knowledge is further nuanced when we witness its prevalence among mid-level (**39%**), entry-level (**29%**), and temporary workers (**46%**). Though it stands to reason that executive professionals have more knowledge on the availability of resources (**8%** reporting lack any knowledge), the discrepancy highlights a communication gap that further widens the negative impacts on the MH of professionals in mission-driven organizations.

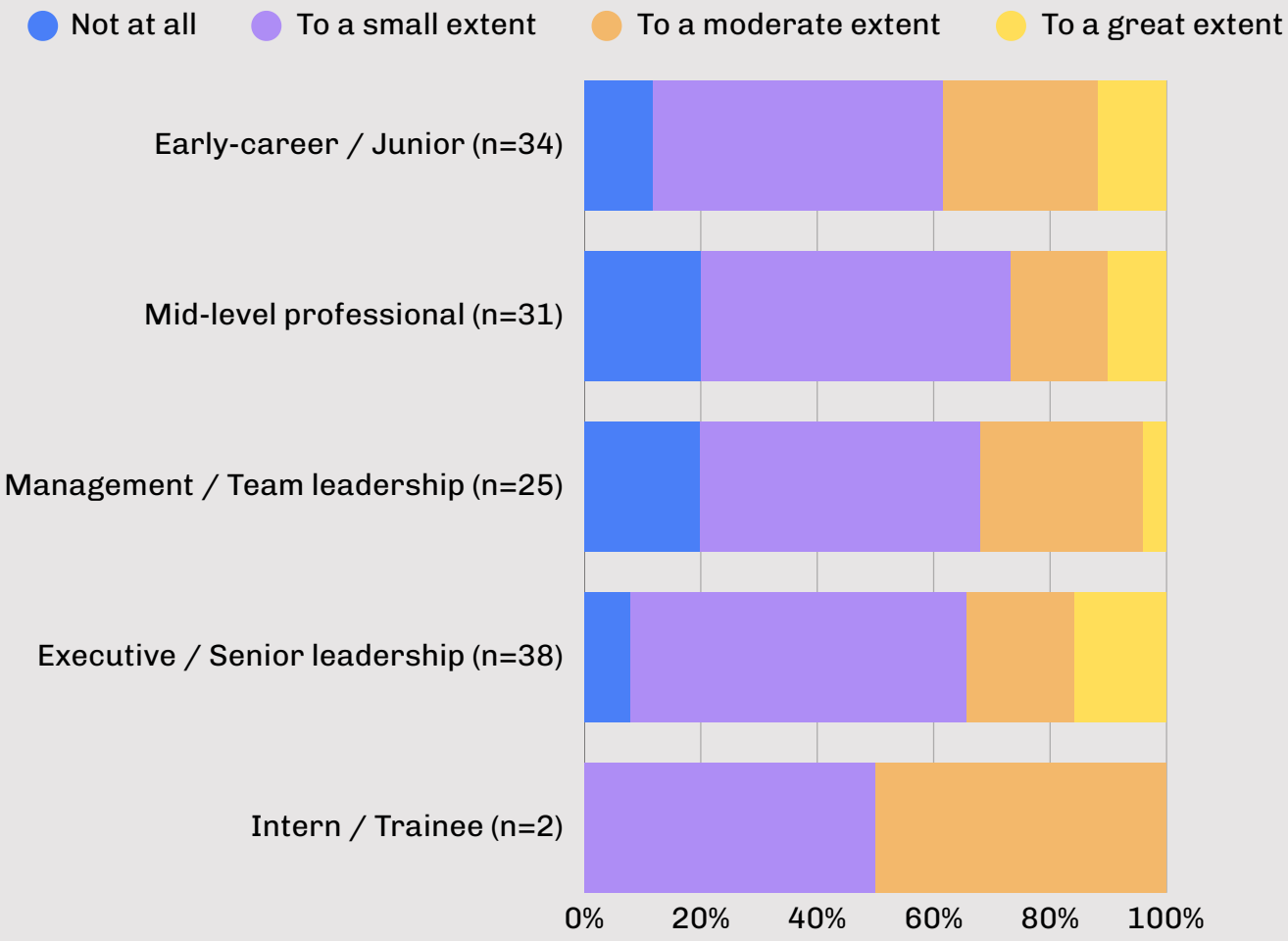
Concerningly, almost **20%** of all respondents reported to not have any resources available to them in their organizations. This is compounded by the response from nearly **25%** of all respondents (**45%** in the case of interns) who reported to not having any personal MH resources despite the high levels of stress and emotional strain they experienced.

These findings suggest that though there is some effort made on the part of organizations, the available resources remain insufficient both in their ability to address the structural drivers of stress as well as in their alignment with the actual needs of employees.

Note on this figure: for consistency with how the organisation-provided-resources gap is reported above, respondents who did not answer this question are counted here alongside those who explicitly selected "None", since both indicate the respondent has no identifiable personal resource.

Availability of MH resources / support

By seniority of respondents



CONCLUSION AND RECOMMENDATIONS

> ***Mental health is frequently acknowledged in principle, but practical measures to prevent harm or support staff are limited, underfunded, or treated as secondary to the mission itself.***

As stated above by one of the respondents, the survey findings paint a mixed picture of a sector in transition.

According to respondents, MH has indeed become a growingly visible talking point within mission-driven organizations. Nonetheless, a persistent gap remains between symbolic acknowledgement and accessible and embedded support structures, highlighting the long journey that lies ahead in translating such rhetoric into meaningful action and tangible outcomes.

Moreover, the discrepancy between the utility of resources provided by organizations and those personally sought out by the respondents suggest the increasing lenience of many on personal coping strategies, and by extension the shortcomings of available resources.

Despite the relative availability of such resources, however, the findings indicate a clear consensus among the respondents that the core challenge remains the structural and organizational conditions affecting the entire sector. From high levels of workload to funding insecurity and precarious contracts, the mental strains in the work of mission-driven organizations are increasingly caused by not only the mission itself, but the lack of support structures as well.

This sentiment is substantiated by the suggestions made by the respondents regarding how best to integrate MH resources in their organizations. Alongside expected suggestions such as the provision of counselling/therapy (**30%**) and internal wellbeing check-ins (**48%**), an overwhelming majority (almost **58%**) remained consistent in their conviction that organizational issues such as lack of clear boundaries and workload management continue to be persistent challenges affecting their MH and wellbeing.

The findings are particularly revealing in highlighting a longstanding paradox within this sector, one where purpose and meaning serve as both sources of fulfilment and contributors to emotional exhaustion. While awareness of MH challenges appears to be increasing, organizational efforts to address them remain fragmented and insufficient, underscoring the need for collective and sustainable approaches. More fundamentally, the findings point to the importance of recognizing the human dimension that lies at the heart of this work, as one respondent succinctly observed:

> ***What is missing is the acknowledgement that we are all human.***

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