

Caring too much

The burnout dilemma faced by fundraisers,
and the emotional toll of a fundraising career

● The fundraising profession

Michelle Reynolds (with Colin Skehan)

April 2025

ROGARE
THE FUNDRAISING THINK TANK

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Rogare would like to thank the UK's Chartered Institute of Fundraising for hosting a webinar to launch this report in April 2025



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Cover photo by Anne Nygard on Unsplash.

Suggested citation:

Reynolds, M. (2025). *Caring too much: The burnout dilemma faced by fundraisers and the emotional toll of a fundraising career*. Portsmouth, UK: Rogare - The Fundraising Think Tank.

Foreword



Damian Chapman

Without fundraisers, many charities would simply cease to function. Yet, despite their significance, fundraisers are operating within a profession that is quietly battling a trauma epidemic – one that we have failed to name, let alone address.

Fundraising is built on relationships and emotional connection. Fundraisers do not simply deal with numbers; they immerse themselves in the realities of the causes they champion. In doing so, they become conduits of trauma, bearing witness to suffering without the same safeguards afforded to other frontline professionals.

Unlike social workers, therapists, or emergency responders, fundraisers have no formal debriefing mechanisms, no structured psychological support, no sector-wide understanding of secondary trauma. Yet they experience it all the same, and it is leading to a silent but devastating crisis in the sector. Burnout is not an anomaly in fundraising – it is endemic.

Compassion fatigue is not rare – it is routine. And yet, we treat these as personal failings, rather than symptoms of a system that has neglected its duty of care. The problem is not that fundraisers are too sensitive; it is that we have built a system that assumes their capacity for emotional labour is infinite.

This report, *Caring Too Much*, is an urgent call to action. It lays bare the structural issues that drive fundraisers to exhaustion – not just the pressure of ambitious targets, but the unchecked emotional demands that come with the job. We have long assumed that fundraisers will simply ‘cope’, that passion alone is enough to sustain them. The evidence proves otherwise. If we continue to ignore this problem, we will lose some of our most talented and dedicated professionals.

If there is one action that stands above all others, it is this: organisations must formally integrate mental health support and trauma-informed practices into fundraising teams. This means providing structured mental health support, ensuring that fundraisers have access to professional counselling or peer debriefing spaces, and embedding these supports into workplace culture – not treating them as emergency interventions when someone reaches a breaking point.

It also means shifting how we define success in fundraising. If fundraisers are only valued for the money they bring in, their wellbeing will always be secondary.

These changes are not radical; they are the basic protections any profession should provide to those working on the frontlines of social good. Fundraisers are not an infinite resource. We cannot afford to keep losing them to burnout. We owe it to them – not just to keep them in the profession, but to ensure they can thrive within it. The time for silence is over.

I want to thank Michelle Reynolds for allowing her work – a crucial step in building the evidence base we need to make lasting change – to be published through Rogare; and to extend my deep gratitude to Colin Skehan, whose courage in sharing his personal experience is a powerful reminder that these issues are not theoretical – they are real, lived experiences affecting people in our profession today. His willingness to speak out is invaluable in driving this conversation forward. 🗨️

Damian Chapman

- Chair of Rogare
- Director of income generation, Money Advice Trust.

1

Introduction – the emotional toll of being a fundraiser

Fundraisers play a pivotal and dynamic role in the voluntary sector, undertaking the intricate task of bridging the chasm between philanthropic aspirations and tangible social impact, serving as a vital conduit for channelling resources into missions that address pressing societal issues.

Their work – our work – is fundamental to enabling impactful social change. Yet that work often goes unseen. As members of inter-professional teams at their charities, fundraisers are exposed to multiple stressors, both in their work with vulnerable communities, and in functioning as professionals within often rapidly-evolving, demanding, and under-resourced organisations.

Fundraisers must have a deep understanding of human emotion, with empathy widely recognised as a core value for successful fundraising (Cahalane 2015; Tsipursky 2021), requiring fundraisers to balance the strategic demands of their role with deep emotional intelligence and care for their donors, beneficiaries and colleagues alike.

This complexity of fundraisers' work – involving high-pressure environments, long hours, and the cultivation of meaningful relationships with diverse stakeholders – creates a challenging emotional landscape. While this can bring great personal fulfilment, there is also great risk of stress and emotional fatigue.

Research has long documented the risks of compassion fatigue, burnout, and secondary vicarious trauma among care professionals (Bride et al 2007; Figley 1995; Pearlman and Mac lan 1995).

Emerging evidence suggests that charity workers are similarly vulnerable (Unite 2019; Charities Institute Ireland 2020; Ecclesiastical 2020; Sargeant and Edworthy 2022). For example, overload and

burnout have been shown to be leading factors driving people to leave the Australian charity sector (Milbourn et al. 2019); a 2021 report from human resources software company HR Locker highlighted that charity workers are particularly susceptible to burnout; while according to a poll by Ireland's national association of charities, 92 per cent of workers know someone in the sector experiencing burnout (The Wheel 2014).

These and other studies found voluntary sector leaders increasingly felt the pressure and stress of their roles (Keogh 2021).

Yet, while there is growing literature on charity workers and leaders, specific research on fundraisers remains limited. With 84 percent of fundraisers reporting immense pressure to succeed (*Chronicle of Philanthropy* 2019), it is clear that more attention is needed on how fundraising professionals' emotional wellbeing is impacted by the demands of their role.

As a professional fundraiser, I have observed first-hand the emotional toll working in this industry can take; emotional fatigue is prevalent. In this paper, I share some of the insights gained through research I undertook as part of my master's in integrative counselling and psychotherapy with Turning Point and University College Cork in Ireland.

My study (see Appendix on p17 for the methodology) explored the impact that working as a fundraising professional can have on fundraisers' emotional wellbeing. The lived experiences shared through the study revealed a spectrum of emotions intricately woven into fundraisers' work: from the compassion satisfaction and emotional resonance that working in a purpose-led and values-aligned organisation brings, to the weight of unmet fundraising goals and the impact of that on the people the charity serves, notwithstanding the dissonance and required

6 | *‘With 84 percent of fundraisers reporting immense pressure to succeed, it is clear that more attention is needed on how fundraising professionals’ emotional wellbeing is impacted by the demands of their role.’*

resilience arising from the pressures and sheer quantity of work the role demands.

In carrying out this study, I have been privileged to have been offered a window into the lives and experiences of some incredibly dedicated, passionate individuals, who tirelessly champion their causes with a care and compassion that is impossible to quantify. Their stories, their resilience, and their vulnerability have left an indelible mark on my understanding of the intricate interplay between empathy, exhaustion, and the unwavering commitment to making the world a better place.

One of the biggest challenges for me as this research journey evolved was the unforeseen struggle in writing about a group of people and an industry I both respect and care so much about. Because the results were undeniable: the emotional labour of a fundraiser is both diverse and profound; emotional fatigue and stress emerged as potent themes shaping fundraising professionals’ experiences.

In the ensuing pages, I discuss the stressors experienced by those working in the fundraising profession that arose through the research, and explore the subsequent impact of these on their emotional and psychological wellbeing.

Our hope is that in sharing some of these findings, we will incite discussion among charity leaders and industry. I hope that we will take these insights to heart and work collectively to build support systems, interventions, and policies that nurture the emotional wellbeing of those who dedicate themselves to effecting real change and the pursuit of positive social impact. 6

Michelle Reynolds

- Chief executive, Anam Cara Parental and Sibling Bereavement Support.



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Michelle Reynolds

2

Four key drivers of fundraiser stress

This section outlines four key findings from my research:

- Fundraisers' inherent empathy is a recurring theme (s2.1)
- Fundraisers put others' interest before their own, not just donors and beneficiaries, but colleagues and their charity too (s2.2)
- Fundraisers feel under constant pressure to achieve more for less and don't feel they have room to say 'no' (s2.3)
- There's a felt sense of idealisation of fundraisers, and an assumption they can do "all the things"; yet fundraisers simultaneously experience isolation and invisibility, often feeling unseen or unheard (s2.4).

2.1 Inherent empathy – a recurring theme

A recurring theme both in research and practice is that a key motivator for individuals working in the charity sector is the desire to make a meaningful difference in the lives of others (Hulbert 2020; Sargeant and Edworthy 2022). Charity professionals are often recognised for their high levels of empathy (Jarrett 2016; Hyde 2018; Tsipursky 2021), and this study reinforced that finding. All participants expressed a strong emotional connection to their work, frequently mentioning feeling "moved", "caring deeply", and forming "emotional connections" – qualities that previous research identifies as critical to successful fundraising (Kim and Kou 2014).

While my study affirmed empathy as a core contributor to many fundraisers' successes, it also highlighted it as the source of significant emotional strain. Fundraising is built on forming deep, meaningful relationships with donors and inspiring them to connect with a cause.¹ This requires fundraisers to be in tune with both the emotional needs of the donor and the causes they represent (Jarrett 2016). The participants in my study agreed that to excel in their roles, they must deeply understand and care about both their donors and the mission of the organisation. Research by Adrian Sargeant and Kathryn Edworthy at the UK's Institute for Sustainable Philanthropy (2022) similarly

highlights that genuine connection is essential for the psychological wellbeing of fundraisers, making emotional engagement a constant in their work.

However, this presents a challenge: how do fundraisers balance the emotional demands of their work with their own wellbeing? My starting hypothesis was that fundraisers are at high risk of distress and fatigue, driven by secondary trauma exposure and their capacity for empathy. This idea is supported by literature from other professions exposed to similar emotional demands.


While empathy is widely recognised as a valuable trait, my work underscores that it can also lead to emotional exhaustion, just as it has been shown to do in other fields (Kim and Kou 2014). Colin's Story, included in this paper (pp12-15), exhibits a brave sharing of his own experience of emotional distress derived from continuous exposure to others' trauma in his work. He wasn't alone in this experience. Many participants reported the emotional toll of being regularly exposed to trauma and grief, whether from the beneficiaries of their charity or from donors. This is called 'secondary trauma', or 'secondary vicarious traumatisation' – see box on p7. Despite this, they also spoke of the deep satisfaction they get from

Secondary vicarious trauma

Secondary vicarious traumatisation is described as the impact of empathic engagement with people who have experienced trauma (McCann and Pearlman 1990). It is believed to develop through regular interaction with trauma-work over time (Pearlman 1995). While much research centres around professionals in direct contact with trauma experiences, there is evidence to suggest that indirect exposure can have equally detrimental effects. One early example found significant parallels between the experiences of sexual assault survivors and the symptomatic reactions of researchers who coded file data describing the cases (Alexander et al 1989). Other researchers have explored the experience of vicarious traumatisation for therapists (Pearlman & Mac Ian 1995) and social workers (Adams et al. 2006), finding that it can significantly disrupt their sense of meaning, safety, self-trust, and identity. This offers qualification that, though not always in direct contact with trauma, fundraisers may be vulnerable to trauma-related distress, particularly when their high empathic attunement is considered.

making a tangible difference in people's lives.

Notably, the emotional impact was greater when participants were dealing with particularly distressing stories or when their personal lives intensified their emotional load, much like Colin shares. This study shows that while empathy is a core strength in fundraising, it also makes fundraisers more susceptible to emotional distress, especially when the emotional weight of their work is compounded by personal challenges. There is a clear link between fundraisers' empathic connections with both donors and beneficiaries and their emotional wellbeing, revealing the dual-edged nature of empathy in this profession.

It's pertinent to consider how fundraisers find room for themselves when a major facet of their work is rooted in the consideration and understanding of others. One of my reasons for beginning this study was to test the hypothesis that fundraisers may have a high propensity for distress or fatigue, arising from their exposure to secondary vicarious trauma (see box above), coupled with strong empathic attunement. This hypothesis, while derived from my own experiences and observations, was further grounded in literature researching other professions (Herzog et al, 2011; Keats and Buchanan 2012; Robinson 2005). 

'While empathy is a core strength in fundraising, it also makes fundraisers more susceptible to emotional distress, especially when the emotional weight of their work is compounded by personal challenges.'

1 That fundraisers build and nurture 'deep' and 'meaningful' connections between donors and a cause is a tenet of standard donorcentric practice - see Rogare's work on building the theoretical foundations of relationship fundraising, and in particular the third volume of this project, which describes how relationship fundraisers perceive their role to be to connect donors to a cause - <https://www.rogare.net/relationship-fundraising>.

2.2 Others before self

What became apparent throughout this study is the propensity, almost inherently so, of fundraisers to put others' feelings and needs above their own. This prosociality and emotional connection suggests a desire to please others (Kim and Kou 2014), and to make others feel good or to take away their suffering. This expands on earlier research, which found that those who feel empathic concern are compelled to reduce the distress or suffering of others, rather than moving away from their self-felt discomfort (Batson et al 1987, 2007). Their empathy motivates them to act altruistically.

I found persistent evidence of participants minimising their own feelings in relation to others, both explicitly ("No challenge compared to the tragedy people faced in Türkiye and Syria, though" – see Colin's Story, pp12-15), and subconsciously, not just relating to beneficiaries, or even donors, but extending also to their colleagues in other departments, most particularly those providing direct care.

But it wasn't just people whom fundraisers put before themselves; a more subtle interpretation indicates that fundraisers also put organisational needs ahead of their own. This is worrying when considered in the context of some other findings from my research: participants also cited the perceived pressure to engage in extended work hours, intense and demanding workloads, and emotional stress, all factors identified in literature as key predictors of burnout (Maslach et al 2001).

Whether innate or learned, this high sensitivity to others' feelings predisposes fundraisers to understand human suffering. However, this deep understanding and empathic attunement may also be the deep-rooted cause of their distress and frustration, their guilt, and even their own suffering. Colin's experience – shared on pp12-15 – is a stark example of this truth.

Powerful testimony from participants revealed fundraisers not feeling seen and valued, and not receiving the support they need, sometimes in

deference to their colleagues working in direct care (though it was reassuring to hear one hugely positive story that went against this grain). This appeared to be consistently reinforced by organisational leadership, with participants expressing their experiences of being "invisible" and "forgotten" compared to their frontline counterparts. Yet fundraisers appear to also often be the first people to pick up additional workloads and say 'yes' to more.

The extent to which this trend is self-imposed by fundraisers, and to what degree it has been compounded by organisations, while important, is arguably not the most pertinent question to explore.

Whatever the answer, this finding highlights the need for change. Charities need to do more to support their fundraisers. Fundraisers need to be empowered and enabled to hold boundaries around workload, to find their individual comfort level around exposure to others' traumatic experiences, and resist the self-imposed yet seemingly reinforced-by-others belief that they must be 'always on' and put everyone else's needs ahead of their own.

And charities need to be empowered to support their staff – administrative staff, fundraisers, and care staff alike – without fear of public scrutiny of investment in their people.

To reiterate the multifaceted nature of this subsection:

- fundraisers' have a predisposition to put others' and their organisations' needs before their own
- the impact of working in an organisation where colleagues are working in direct care, sometimes facing extreme hardship and suffering
- a leadership, or perhaps even sector-wide, trend of unconsciously placing greater worth on those providing the direct services – the more visible impact. 6

'My research revealed a propensity for fundraisers to take on high workloads and often be the ones stepping in to take on more; it is impossible to ignore the concomitant cultural expectation and pressure from organisations and leadership. In fact, perhaps this has been overlooked for too long.'

6 | *‘Fundraisers cited the perceived pressure to engage in extended work hours, intense and demanding workloads, and emotional stress, all factors identified as key predictors of burnout.’*

2.3 The pressure to achieve more – “There’s no room for no”

Fundraisers can experience a pervasive weight of expectation, without the resources or support necessary to ensure their wellbeing and psychological safety. As I was analysing the data, it became apparent that organisational stressors and balancing different types of work, in this case often outside the usual remit of a fundraising role, added significantly to feelings of burnout or compassion fatigue for participants. The data revealed how the knowledge that there are real people impacted by the success of their work added to the pressure and burden felt by fundraisers.

This finding was captured in one participant’s interview:

“There’s no room for no, because people depend on this service. We don’t have the resources for more people, so we’ll get it across the line...There’s always more. Always. And then there’s never enough resources or support.”

Participants all asserted or alluded to the expectation and pressure as being self-imposed, describing it as “coming from inside my own head” and “pressure we put on ourselves because we know how much it matters”; and that this pressure was mostly felt due to the empathy fundraisers had for those who needed the charity’s services, “because people depend on this service”.

In many cases, participants spoke of supportive managers, and rarely of feeling direct pressure from leadership. Simultaneously however, they spoke of regularly working beyond their hours, feeling significantly under-resourced and unsupported, and a felt burden of being expected to do everything and consistently say yes.

Even though fundraisers appear to interpret their feelings of pressure and expectation as self-inflicted, it nonetheless raises a question about to what degree are organisations working to relieve this felt

pressure, or whether they are even exasperating it? Recent research undertaken with 2,674 fundraising professionals found that over 60 per cent of respondents identified unrealistic expectations of senior management or board as a major cause of feeling demotivated and drained, with 66 per cent citing not being supported by their organisations’ leadership (Sargeant and Edworthy 2022).

My study adds to these findings, as participants said they were the ones most likely to take on additional responsibilities outside their remit, despite often being already stretched beyond capacity; and feeling not only under-resourced themselves, but that support functions to fundraising were also often the last to get the investment needed to ensure success, adding “immense pressure” for fundraising teams. Fundraisers cited being the “go-to for all the things”, taking on far more than their share of management team responsibilities, and generally being the “yay-sayers”.

My research suggests that fundraisers are more likely to volunteer to help in other areas because of an innate or learned impulse to say yes and to want to help, and a drive to improve their organisations.

There was also testimony to suggest that because fundraisers are not providing direct care, they can be considered as the more natural people to take on more, as colleagues in direct care are protected around performing their care role only. Perhaps this is further compounded by what is often perceived as a less flexible and more imminently important role.

Participants’ testimony plainly demonstrated a lack of practical resourcing and lack of both tangible and emotional support as a significant issue and cause of emotional stress. Further, this huge gap in resourcing and support for fundraisers was compounded by its isolation from frontline colleagues, who often were perceived to have access to more extensive support, and be valued more highly.

This is a further validation of previous research, in which fundraisers named feeling undervalued for their work as the foremost contributor to symptoms of burnout (Sargeant and Edworthy 2022).

There is a clear pattern emerging of fundraisers continuing to take on more work, more burden and frustration, despite an often already challenging workload. This is happening concurrently with disproportionate, though likely unintended, pressures from the organisation’s senior leadership, all while experiencing inadequate tangible resources and limited, if any, psychological support or wellbeing.

Fundraisers are experiencing this while also being exposed to significant human trauma and suffering (see Secondary Vicarious Trauma boxout on p7), with the added weight of playing a critical role in securing the funds to ensure the provision of the vital support they need.

What stood out in the findings was how this phenomenon, existing in plain sight, was almost accepted: “That’s just life and charity,” said one participant, shortly followed by “but it shouldn’t be”.

These findings fit with recent Irish research, which highlighted that the significant pressures and stretched resources experienced by charity workers led them to be more likely to experience job burnout than any other profession (HR Locker 2022). My study augments these findings, identifying other significant contributors to fundraiser burnout and fatigue, including high levels of empathic attunement, organisational and collegial isolation, and the internal pressures on the part of fundraisers to achieve more, usually with less resource and support.

Given the importance of the fundraising role to most charitable organisations, it is curious both that fundraisers accept and often lean in to this almost incessant workload expectation, and that organisations facilitate it, given that most organisations rely on fundraising for their very survival.

While my research revealed a propensity for fundraisers to take on high workloads and often be the ones stepping in to take on more, it is impossible to ignore the concomitant cultural expectation and pressure from organisations and leadership. In fact, perhaps this has been overlooked for too long. ●

2.4 Idealised, yet invisible

The felt pressure highlighted throughout the data indicates a disproportionate projection of expectation placed on the role of fundraiser. While participants’ asserted that the pressure was self-imposed, other observations reveal inconsistencies, suggesting that though excessive expectations by others may not be explicit, unreasonable demands on fundraisers have been almost normalised, with implicit pressure to meet overly high expectations coming from leadership and organisational culture.

Participants spoke of feeling unsupported, under-resourced, and an unmistakable yet reluctant disclosure of not feeling valued or understood. This directly aligns to other industry research that exposed feeling unappreciated, not respected as a professional, and that their voice is not heard, as three of the most significant drains on professional fundraisers (Sargeant and Edworthy 2022).

While not explored in depth in this study, it raises the question of how and why this issue so often goes unnoticed and unaddressed. Research in other sectors has found that job-related stress is exacerbated by the cultural expectations of the profession, and a perception that saying no is not an option, while complaining about workload or stress is a sign of weakness or incompetence (Keats and Buchanan 2012).

It is possible that there is truth to this for fundraisers too. Some fundraisers in this study, however, reported that they had vocalised their concerns, experiencing little support or acknowledgement in return, and had to argue for every additional resource or investment in their team’s wellbeing.

It is important to also acknowledge the pressure and isolation that charity CEOs can experience too, evidenced clearly in a recent Irish study, which found that charity CEOs often experience feelings of isolation, overwhelm, and a lack of support (Keogh 2021). However, it is reasonable to argue that there should be some responsibility on the part of charity leaders and boards to proactively engage with all their staff, show an authentic interest in understanding their work and challenges, and to be ardent in their pursuit of change to reduce job-related stressors and look for ways to improve employee wellbeing.

My data demonstrates a lived sense of idealisation on fundraisers: An unconscious, unintentional, yet legitimately-felt association exists, that the fundraiser can do “all the things” – can deliver the impossible.

Even though fundraisers are not direct care workers, they experience an unbalanced idealisation not unlike what the literature reveals of those in direct service of vulnerable people. The weight of this expectation was evident in the data:

“The stakes are high, you know? People need us to get the care they need.”

“We feel immense pressure...there are very real and significant life-impacting consequences if we don't raise that money.”

Simultaneously, fundraisers also experience isolation and invisibility:

“It feels as though we're kind of left...we're left to the side. People don't seem to consider fundraising.”

“The interest just isn't there...We're just invisible”.

This invisibility extended beyond relational experiences in an unconscious pattern of participants diminishing their own needs in favour of others. One participant spoke of how their services team was the one working at the “coalface” who would be “dealing with some of those really difficult cases”. Another spoke about there being support available for people on the ground...“they're dealing with horrific cases”.

In both cases, fundraisers were subconsciously accepting that those at the coalface were more deserving of support than fundraisers (exactly as Colin describes on pp12-15). This mirrored the way service delivery colleagues view fundraisers, with comments such as “What? That's nothing. Guess what happened in services last night” when fundraisers did try to share their own experiences.

When the concurrent findings of fundraisers feeling unseen and unheard within their organisation, and yet also responsible in some way for the potentially life-altering needs of other humans, are considered, the need for both practical and psychological support is clear. ●

‘Fundraisers subconsciously accepted that those at the coalface were more deserving of support than fundraisers. This mirrored the way service delivery colleagues view fundraisers, with comments such as “What? That's nothing. Guess what happened in services last night” when fundraisers did try to share their own experiences.’

‘Given the importance of the fundraising role to most charitable organisations, it is curious both that fundraisers accept and often lean in to this almost incessant workload expectation, and that organisations facilitate it.’

3 – Colin’s story

I’m only a fundraiser, not a frontline worker who *really* deserves help

Over the next four pages, long-standing Irish fundraiser Colin Skehan recounts how he went through a mental breakdown fuelled by the stresses of work and life. He talks about his worry that he was a phoney for even feeling like this compared with what happens to people in ‘real life’. Yet when Colin opened up to tell his story, he found that there were other fundraisers – many others – who had gone through something very similar.

‘Is the university open?’ I wondered, as I tried to anticipate traffic at my destination – Maynooth, the college town where I worked with Trócaire, one of Ireland’s largest INGOs. If it was holiday season, the trip would be a breeze. But I couldn’t remember what day it was. What month even. For far too long.

‘What is wrong with me?’ I thought, and drove on.

It had been an intense week. A devastating earthquake hit Türkiye and Syria. As the fundraising lead for the Irish Emergency Alliance – a group of INGOs mounting a coordinated fundraising response – I was immersed in it.

‘I must get more sleep,’ I thought. But that was a challenge too with 10-month-old Alex at home. No challenge compared to the tragedy people faced in Türkiye and Syria, though.

Put it aside, Colin. Drive on.

I did the smart thing and booked a day off. Then promptly cancelled as imperatives crowded. Then one morning, as I showered, I began to wonder if I was awake or dreaming. Genuinely not sure.

When things finally slowed down, my wife Jeanne said: “I think you might need to take some stress leave.” “I don’t want to be that guy,” I scoffed, “I just need a good night’s sleep.”

But, when grocery shopping that evening, as the colours and lights overwhelmed me and the first of many panic attacks started, I accepted she might be right.

When I started dissolving into tears at the slightest stress, I knew it.

It took me months to find my way back.

Colin and his dog Willow.

In my darkest hours the negative voice in my head defeated me utterly. 'Look at you now. You're only a burden on everyone. You're useless. And now you're a mentally ill person. That's who you are now.' He was a mean one, that inner critic.

I rationally knew this was silly. But my mind was at war with itself, and for the longest time I was a bystander. I remember sitting with my beautiful son and wife and wondering why I felt so utterly disconnected from them and everything around me. 'You should be grateful,' I chided myself. But I felt a void inside.

I didn't realise then - I was in massive denial, I think - but I would soon be diagnosed with anxiety and depression triggered by stress. This diagnosis was delivered by a forthright, but kind, GP - the fifth I'd spoken to - as I wept in his office.

This directness was exactly what I needed.

I count my blessings every day for all the help I had to find my way back. There were a couple of pivotal things that helped me make it.

Number one: I have a loving, supportive family. Especially my wife Jeanne, who was a rock throughout, despite having a heart scare and being suddenly admitted to hospital for a week herself, not long into my own crisis. (I'll never forget that week. Having to wean Alex on to formula, drop after tiny drop, using a Calpol dispenser. Or watching Miss Rachel sing 'Mama, mama. Can you say mama's name?' through the tears.)

Number two: The fact that my employer had a humane sickness policy (which are not legally mandated in Ireland) was hugely important. Otherwise, I would have had to soldier on or risk losing the roof over our heads - and who knows where my faltering mind would have ended up then. Another vital support was Trócaire's employee assistance programme. On top of that, they



also provided free access to clinical therapy with an organisation that specialises in working with INGOs. This was a game-changer for me.

One thought battered my mind ahead of my first meeting with therapist Aaron: 'I'm only a fundraiser. They must deal with frontline people who really deserve help all the time.' I felt like a phoney, and in my darkened mind, I feared Aaron would see me that way too.

Instead, Aaron helped me understand the concept of secondary trauma. That focusing on the pain and suffering of others, again and again, has an understandable effect. For me it was like a switch was flicked. It gave me permission to feel my feelings. I realised I'm allowed to be affected and I have a right to look after myself. That was a key step towards healing.

Of course, a fundraiser's lot doesn't compare with the suffering people face in real life. But that doesn't mean we should dismiss our own challenges. In fundraising (and across the orgs we work for), we often immerse ourselves in harrowing situations again and again. Because we want to help. Because we have to help. And of course scrolling past pictures of dead babies in Gaza (pictures too horrific to use in fundraising) is going to have an effect. Of course diving into stories of abuse, homelessness, addiction, disability, illness and death, time and again, is going to have an effect. But we tend to minimise our own challenges and feelings.

‘One thought battered my mind ahead of my first meeting with therapist Aaron: ‘I’m only a fundraiser. They must deal with frontline people who really deserve help all the time.’ I felt like a phoney, and in my darkened mind, I feared Aaron would see me that way too.’

6

It seems obvious to me now, but my perspective had gone at the time. My mental strength. My ability to cope.

I understand now that it wasn't one thing that brought me to this point. It was many. By the time of my breakdown, we had bought our first home, my mother survived a cancer scare, and I had been at the forefront of numerous emergency responses - three as the fundraising lead of The Irish Emergency Alliance on top of the day job - in the space of 17 months. It was also the tail end of the pandemic. Somewhere in the middle of all that, we had our first baby boy, Alex (now two and three quarters).

Now I get it. That is a lot. We've all had to deal with a lot these past few years.

When I became a dad, I also found the empathy I could feel went through the roof. And, with all that new parenthood entails (especially lack of sleep!) my coping skills crashed through the floor. I was doing more and more - and minding myself less and less.

In that situation when a baby boy, close in age to your own son, dies in a Trócaire health centre in Somalia, it hits you differently.

When you see a photo of a dad clutching a hand poking out of the rubble in Syria - the hand of his dead daughter - it hits you differently.

As well as gaining perspective with time and support, there are some key things that were genuinely transformational that I'd like to share.

Early in my breakdown, I went to an extremely well-reviewed local clinic for what I thought was a massage. Instead, I met an Irish gentleman who had travelled the world and was a doctor of Chinese medicine. He talked to me for three hours. Among other things he introduced me to meditation. This, along with lessons learned from therapist Aaron, and Acceptance and

Commitment Therapy (ACT), taught me the concept of de-identification with thought.

Basically, for the first 44 years of my life, my mind was entangled with my thoughts nearly all the time. I believed the inner voice was the law, and the more I fought against unhelpful notions, the stronger they got. Through meditation and ACT, I realised that a thought is just a thought. Every single thought you ever had has disappeared. Even memories are just thoughts. We don't have to put them in charge. We don't have to fight them (fighting only makes them stronger!).

Learning to sit back and observe my inner life absolutely changed my whole life. It helped me convert my inner critic to an inner friend, and, increasingly, champion. (Do look up the 'high-five habit' from Mel Robbins for another simple and powerfully effective tool there. Another one from my esoteric doctor-of-Chinese-medicine friend.)

Diagnosis and medication, taken at the direction of that forthright GP I mentioned earlier, helped give me the space to do this.

What I learned helped me take control of my own wellbeing. It has helped me to be a better me, a better husband and a better father. And a better fundraiser.

And I'll never forget a special moment when I truly felt, 'you're not alone'.

It was May 2023. I had some false starts returning to work, but I was back for good this time. 'Can I cope with a fundraising conference,' I thought. Still shaky. But I went to 'ReCharge: A Conference for Fundraisers', in Dublin. I'm so glad I did. Because they had a session where all attendees could nominate topics for discussion. The deal was, if your suggestion was upvoted, you would kick off the conversation. So, I entered two nerdy fundraising questions. Then I took a deep breath and wrote down 'mental health and

6 *‘Of course scrolling past pictures of dead babies in Gaza (pictures too horrific to use in fundraising) is going to have an effect. Of course, diving into stories of abuse, homelessness, addiction, disability, illness and death, time and again, is going to have an effect.’*

fundraising’. That was the only one of mine upvoted. And massively. I remember sitting in a room, waiting nervously for someone, anyone, to arrive. Within minutes, I was one of 26.

Another deep breath and I shared my story, not knowing what to expect. But story after story, experience after experience echoed my own.

When my good fundraising friend Michelle Reynolds shared that she was doing research on mental health and fundraising, as part of her psychotherapy degree, I was intrigued. When she said my experience reflected her research findings, I felt validated. When a group of fundraisers could share their pain together, I felt less alone.

I soon volunteered to take part in Michelle’s research (I’m subject number P6). I have since had the honour of presenting alongside Michelle on what the research says, and what I have learned. I grew so much from my experience that I wouldn’t change it for the world. For the past year and a half, my mental health has never been better. I believe I have the tools now to handle my stuff and keep it that way.

So, if you’re struggling, please know you’re not alone. If you’re struggling, please don’t minimise what you’re going through. Please don’t beat yourself up (you wouldn’t talk to a friend the way you talk to yourself sometimes!). Please know that thoughts are only thoughts. They’re not the boss.

And if you’re struggling, please mind yourself. Do the things that make you feel strong and whole. Take the time to live a life that’s closer to your values.

You’re not only allowed to.

You have to.

Because you can’t be strong for others, if you’re not strong for yourself. 6

In summary

1. Secondary trauma: it’s a thing (see p7) - mind yourself and others!
2. De-identification: Thoughts are only thoughts - they’re not the boss, and certainly not fundamentally right or fundamentally you.
3. Read Michelle’s work.
4. Know you’re not alone.

Suggested citation:

Skehan, C. (2025). ‘Colin’s story - I’m only a fundraiser, not a frontline worker who *really* deserves help’, in Reynolds, M. *Caring too much. The burnout dilemma faced by fundraisers and the emotional toll of a fundraising career*. Portsmouth, UK: Rogare - The Fundraising Think Tank.

4

Summary and discussion – the need for change

Three key and overarching findings emerge from my research, each pointing to the need for change.

First, it was notable how participants often felt unable to tell management or colleagues about the effects of their job-related stress and the impact on emotional wellbeing. This reluctance appears to be in part a reflection both of a belief that fundraisers can do “all the things”, and the unintended silencing of fundraisers and fundraising within the culture of charities. It gives cause for consideration as to what elements would need to be in place to create the freedom and safety needed for fundraisers to speak about their experiences and what they might need to support them.

Second, the inherent yet unconsciously reinforced belief that fundraisers hold about their role and identity appear to dismiss and devalue the reality of the effects of their experiences. Charity leaders need to consider how they might help in preventing organisational culture from limiting possibilities for repair and support.

Third, participant reports offer an opportunity for both charity leaders and psychotherapists to raise awareness about the significant degree of tension between the collective cultural beliefs and values in the charity sector and the impact this has on fundraisers as individuals. This study adds to prior research (Bell and Cornelius 2013; Hulbert 2020; Keogh 2021; Sargeant and Edworthy 2022) to increase the awareness of fundraisers’ mental health so that needed changes can continue to evolve and further support can be developed in the future.

The findings offer insights into the emotional toll often remaining hidden behind the scenes of philanthropic work. Honouring the participants’ honesty and vulnerability by accurately representing the gravity and significance of the findings felt so important.

Yet my love of our sector and inherent belief that everyone is truly doing their best brought a huge tension for me in presenting findings that showed a more disheartening and distressing perspective on the profession. In reporting these findings, I felt a consistent pull to make concessions for the challenges our profession faces: charity leaders are stretched, overworked, and isolated too; charity boards are volunteers, so already giving of their time; it is only thanks to the donors that we can do the work we do. So how can we possibly ask

for more? Everyone is truly doing their best. And we all do it with heart.

However, it is exactly this attitude and these concessions so inherent in nonprofit professionals that has enabled this trend to continue for so long. Many fundraisers are so committed to their organisation’s mission that the intensity of work feels worth it.

But there’s a fine line between finding your work fulfilling and caring about it so much that it drains you. If we are ever to see change, we have to start having the difficult conversations. And the findings are clear – we need to do more to support our

‘There’s a fine line between finding your work fulfilling and caring about it so much that it drains you. If we are ever to see change, we have to start having the difficult conversations. And the findings are clear – we need to do more to support our fundraising professionals. We need to do better.’

Appendix – Methodology

fundraising professionals. We need to do better.

There is no simple solution to a problem as endemic as emotional exhaustion and burnout in the charity sector. Deep personal ties to the mission, workplace cultures minimising the need for rest by normalising overwork, deeply meaningful work that is always urgent, an implicit expectation that working in the charity sector means you should always give well over and above, and societal and systemic ideology that charities should do more with less, all contribute to fundraising professionals – and other charity workers too – working far beyond what is healthy.

It takes leadership and culture change to shield employees from burnout. It takes us asking ourselves and each other the difficult and awkward questions, being prepared for difficult answers, and a commitment to do better. But the future of the fundraising profession – and with it, the future of the charity sector – depends on it. Unless things change, our extraordinary sector will lose some of its most intelligent, compassionate and impressive people. We are already losing them.

I hope this research, and the fantastic research and reflections already published by other authors, will incite discussion among charity leaders and industry. I hope we will take these insights to heart and work collectively to build support systems, interventions, and policies that nurture the emotional wellbeing of those who dedicate themselves to effecting real change and the pursuit of positive social impact.

I hope that this is a beginning of a conversation, an awareness, and a commitment to the wellbeing of those who tirelessly strive to make a difference. In carrying these stories forward, we can advocate for change and foster environments where empathy thrives without compromising the emotional health of those who offer it. 🌱

As part of my master's in integrative counselling and psychotherapy with Turning Point and University College Cork in Ireland, I set three research questions:

1. What are fundraising professionals' lived experiences of emotional wellbeing, fatigue and stress in their work?
2. What is the impact of these experiences and emotions?
3. Further, what role, if any, is there for psychotherapy in supporting this group of professionals?

The six fundraisers selected for interview (using what is called a 'purposive sampling strategy') all had a minimum of five years' experience fundraising for charities that service people.

As the research questions aimed to explore the lived experiences of fundraising professionals, I followed an interpretivist approach to my qualitative research. Interpretivism is an approach to research that aims to understand social reality and phenomena from the perspective of individuals; and so my semi-structured interviews allowed respondents to freely disclose their unique, subjective experiences and feelings without constraint, eliciting rich, descriptive narratives as participants shared their lived experiences, perspectives, and emotions around the topic.

I then conducted a thematic analysis of the interviews to identify meaningful patterns and themes within the data.

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Michelle Reynolds



With 20 years' cross-sector experience, Michelle is an experienced nonprofit leader, board and sub-committee member, integrative psychotherapist, and executive coach, with a proven track record of fostering organisational growth, cultivating high-performing teams, and driving meaningful social impact. With particular experience in the children, family and human support services in the nonprofit space, Michelle has specialised in fundraising and communications, before moving into her current role as CEO of Anam Cara Parental and Sibling Bereavement Support in Ireland.

Michelle's love for the nonprofit world is rooted in her passion for people. This deep belief in people inspired her master's in integrative psychotherapy and further training as an executive coach and mentor, and professional diploma in diversity, equity, inclusion and belonging. Michelle loves fostering inclusive, compassionate work cultures, where diversity and differences are embraced and valued, and people love coming to work.

Michelle is currently a practising psychotherapist, executive and career coach, and leadership and nonprofit consultant. She is also devoted mum to Ella, Ben, and Chloe, lover of animals, baker of birthday treats, keen strength trainer, huge Harry Potter fan (and proud Hufflepuff), and unapologetically enthusiastic morning person!

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Acknowledgements

There are so many people without whom this research would not have happened, and I extend my sincerest gratitude and appreciation to those who have made this accomplishment possible. My deepest gratitude is extended to the wonderful individuals and talented fundraisers who participated in this research and so generously and openly shared their experiences, insights, and emotions. Your willingness to open up about the challenges you face has illuminated a path toward a more compassionate and empathetic world. A special thankyou to Colin, who has been the greatest source of inspiration, belief, and support.

Colin Skehan



Colin took his first steps into the charity world as a face-to-face fundraiser in 2007. In the 18 years since, Colin has helped drive rapid growth at some of Ireland's leading charities, including Merchants Quay Ireland Homeless and Addiction Services and leading INGO Trócaire, where he spent six years as head of donor marketing, overseeing direct marketing, data analysis and donor care. In his role at Trócaire he also spent two years as fundraising lead at The Irish Emergency Alliance. Along the way, he and his teams have won many accolades, including multiple fundraising-team-of-the-year and campaign awards.

Now, as director with Revolutionise International, home of the 'Great Fundraising' Project and the recently published book *Great Fundraising Organizations*, he's helping great causes drive growth and impact around the world.

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Rogare brand identity created by Rebecca Woodall at Bluefrog Fundraising.

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