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Breaking the Silence: A Phenomenological Exploration of Secondary Traumatic Stress in U.S. College Student Affairs Professionals

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BREAKING THE SILENCE: A PHENOMENLOGICAL EXPLORATION OF SECONDARY 
TRAUMATIC STRESS IN U.S. COLLEGE STUDENT AFFAIRS PROFESSIONALS

by

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ABSTRACT

BREAKING THE SILENCE: A PHENOMENLOGICAL EXPLORATION OF SECONDARY TRAUMATIC STRESS IN U.S. COLLEGE STUDENT AFFAIRS PROFESSIONALS

Robert Jason Lynch
Old Dominion University, 2017
Director: Dr. Chris R. Glass

Breaking the Silence: A Phenomenological Exploration of Secondary Traumatic Stress in U.S. College Student Affairs Professionals is a qualitative-intensive mixed methods study using phenomenology and art-based research techniques to uncover the essence of secondary traumatic stress in U.S. college student affairs professionals. Researchers in the fields of psychology, counseling, social work and other helping professions suggest that repeated exposure to individuals experiencing trauma, or hearing repeated details of an individual’s trauma, have negative outcomes on professional helpers. Coined secondary traumatic stress, this phenomenon may be defined as “the stress resulting from helping or wanting to help a traumatized or suffering person” (Figley, 1999, p. 10). Despite severely increasing incidents of student trauma, little scholarship has focused on the impact that support-work may have on the professionals often acting as first responders for students. This study aimed to address this gap in knowledge.

Guided by phenomenological methods described by Moustakas (1994), this study investigated the essence of secondary traumatic stress through the lived experiences of 30 college student affairs professionals who have supported students through one or more traumatic events. These individuals were also asked to complete a brief visual representation activity used within their interviews to better understand the nuances of their experience of secondary trauma and how it manifests. A total of seven meta-themes emerged from the data: 1) Cumulative
nature of trauma support in higher education 2) Inadequate professional preparation, resources, and guidance 3) Professional’s self-efficacy as an effective support-person 4) Impact of professional and organizational culture on the development of maladaptive views of student support 5) Importance of personal and professional support networks 6) Personal impact of professional’s relationship with student(s) in crisis 7) The negative impact of support-work on personal wellness. These themes suggested that the professionals in this study experienced negative psychological and physical outcomes as a result of their work supporting students through trauma. Findings also suggested the repetitive and collective nature of student trauma within student affairs work. Implications for policy, practice, and future research are discussed.
This dissertation is dedicated to all who gratefully give of themselves in the hope of making others whole again.
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# TABLE OF CONTENTS

<table>
<thead>
<tr>
<th>LIST OF TABLES</th>
<th>xiii</th>
</tr>
</thead>
<tbody>
<tr>
<td>LIST OF FIGURES</td>
<td>xiv</td>
</tr>
</tbody>
</table>

## Chapter

### I. INTRODUCTION
- Psychological Trauma and Secondary Traumatic Stress
- Burnout, Secondary Trauma, and Compassion Fatigue
- Statement of the Problem
- Purpose of the Study
- Primary Research Questions
- Question 1
- Question 2
- Question 3
- Summary of Research Design
- Significance of the Study
- Practical Implications
- Theoretical Implications
- Assumptions, Limitations, and Scope
- Chapter Summary

### II. REVIEW OF THE LITERATURE
- Exploring Psychological Trauma
- Understanding Trauma
- Trauma and the U.S. College Student
- Mental Health
- Racialized Trauma
- Sexual Violence
- Secondary Traumatic Stress
- Defining Secondary Trauma
- Symptoms of Post-Traumatic Stress Disorder
- Other Requirements
- Secondary Trauma, Burnout, and Compassion Fatigue
- Burnout
- Compassion Fatigue
- Impact on Professional Helpers
- Consequences of Student Affairs Work
- Chapter Summary
III. METHODOLOGY ........................................................................................................... 33
    RESEARCH QUESTIONS ................................................................................................. 34
        QUESTION 1 .............................................................................................................. 34
        QUESTION 2 .............................................................................................................. 34
        QUESTION 3 .............................................................................................................. 35
    RESEARCH PARADIGM ................................................................................................. 35
    RESEARCH DESIGN ....................................................................................................... 36
        PEHNMENOLGY .......................................................................................................... 36
        ART-BASED RESEARCH ............................................................................................ 37
    EPOCHE .......................................................................................................................... 39
    CO-RESEARCHER SELECTION AND RECRUIMENT ..................................................... 40
    PROCEDURES AND DATA SOURCES ........................................................................... 41
        STSAP SURVEY ........................................................................................................... 41
        VISUAL REPRESENTATION EXERCISE ..................................................................... 42
        RECORDED INTERVIEWS .......................................................................................... 42
            SUBJECT-OBJECT INTERVIEWING ....................................................................... 43
    DATA ANALYSIS ........................................................................................................... 44
        PEHNMENOLOGICAL REDUCTION .......................................................................... 44
        BRACKETING ............................................................................................................... 44
        HORIZONTALIZATION ............................................................................................... 44
        DELIMITED HORIZONS .............................................................................................. 45
        IN Variant THEMES .................................................................................................... 45
        INDIVIDUAL TEXTURAL DESCRIPTIONS ...................................................................... 45
        COMPOSITE TEXTURAL DESCRIPTIONS ...................................................................... 45
        IMAGINATIVE VARIATION ........................................................................................... 45
        VARIATIONS ................................................................................................................ 46
        STRUCTURAL THEMES ............................................................................................... 46
        INDIVIDUAL STRUCTURAL DESCRIPTIONS .................................................................. 46
        COMPOSITE STRUCTURAL DESCRIPTIONS .................................................................... 46
        SYNTHESIS OF COMPOSITE STRUCTURAL AND TEXTURAL DESCRIPTIONS ............... 47
    TRUSTWORTHINESS ....................................................................................................... 47
        CREDIBILITY ............................................................................................................... 47
        TRANSFERABILITY ...................................................................................................... 48
        DEPENDABILITY ......................................................................................................... 48
        CONFIRMABILITY ....................................................................................................... 48
    ETHICAL CONSIDERATIONS .......................................................................................... 49
    METHODOLOGICAL LIMITATIONS .............................................................................. 49
    CHAPTER SUMMARY ..................................................................................................... 50

IV. PRESENTATION OF RESULTS ......................................................................................... 52
    SUMMARY OF DATA ANALYSIS .................................................................................... 53
        STEP 1. LISTING AND PRELIMINARY GROUPING ...................................................... 53
        STEP 2. PHENOMENLOGICAL REDUCTION AND ELMINATION ................................. 53
V. DISCUSSION .............................................................. 91
RELEVANCE AND SIGNIFICANCE OF FINDINGS ......................... 93
CONTEXTUALIZATION WITHIN EXISTING LITERATURE ...................... 95
IMPLICATIONS FOR RESEARCH AND PRACTICE ........................... 97
PRAGMATIC IMPLICATIONS .............................................. 97
DEPARTMENT AND UNIVERSITY LEADERS ................................ 97
GRADUATE AND PROFESSIONAL PREPARATION ......................... 99
CONSIDERATIONS FOR THE PROFESSION ............................. 100
THEORETICAL IMPLICATIONS ........................................... 100
EXPANSION OF CURRENT STUDY ....................................... 101
EXTENDING UNDERSTANDING .......................................... 101
INTERDISCIPLINARY PERSPECTIVES .................................... 102
LIMITATIONS .................................................................. 102
CONCLUSION .................................................................. 105

REFERENCES .................................................................. 108

APPENDICES ..................................................................... 121
A. VISUAL REPRESENTATION OF SECONDARY TRAUMA INSTRUCTIONS .. 121
B. SEMI-STRUCTURED INTERVIEW PROTOCOL ................................ 122
C. RECRUITMENT EMAIL .................................................. 124
D. DEVELOPMENT AND VALIDATION OF STSAPS ...................... 125
E. SECONDARY TRAUMA IN STUDENT AFFAIRS PROFESSIONALS SCALE ..126
F. CO-RESEARCHER PROFILES .................................................................129
G. INFORMED CONSENT FORM .............................................................139
H. IRB APPROVAL MEMO .................................................................142
I. CO-RESEARCHER VISUAL REPRESENTATIONS SECONDARY TRAUMA....143
J. CO-RESEARCHER SUPPLEMENTAL QUOTES .....................................169
K. QUANTITATIVE SUMMARY OF META-THEMS ................................219

VITA ........................................................................................................222
## LIST OF TABLES

<table>
<thead>
<tr>
<th>Table</th>
<th>Description</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>Summary of Trauma Definitions</td>
<td>17</td>
</tr>
<tr>
<td>2.</td>
<td>DSM-V PTSD Criteria</td>
<td>24</td>
</tr>
<tr>
<td>3.</td>
<td>Summary of types of helpers identified by Okun (2002)</td>
<td>27</td>
</tr>
<tr>
<td>4.</td>
<td>Co-Researcher Demographics</td>
<td>55</td>
</tr>
<tr>
<td>5.</td>
<td>Summary and description of themes</td>
<td>57</td>
</tr>
</tbody>
</table>
# LIST OF FIGURES

<table>
<thead>
<tr>
<th>Figure</th>
<th>Description</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>Continuum of Traumatic Stress, Barnes (2013)</td>
<td>26</td>
</tr>
<tr>
<td>2.</td>
<td>Example of Rorschach Inkblot Test</td>
<td>38</td>
</tr>
<tr>
<td>3.</td>
<td>Rene’s visual representation of secondary traumatic stress</td>
<td>60</td>
</tr>
<tr>
<td>4.</td>
<td>Veronica’s visual representation of secondary traumatic stress</td>
<td>63</td>
</tr>
<tr>
<td>5.</td>
<td>Margaret’s visual representation of secondary traumatic stress</td>
<td>67</td>
</tr>
<tr>
<td>6.</td>
<td>Angie’s visual representation of secondary traumatic stress</td>
<td>71</td>
</tr>
<tr>
<td>7.</td>
<td>Elizabeth’s visual representation of secondary traumatic stress</td>
<td>76</td>
</tr>
</tbody>
</table>
CHAPTER 1: INTRODUCTION

“Student affairs professionals are frequently placed in the roles of helpers, and many students rely on them for compassion, support, and guidance. In order to be effective helpers, practitioners need to develop essential awareness, knowledge, and skills to guide their efforts” (Reynolds, 2010, p. 410).

For decades, the field of college student affairs has been concerned with the holistic care and development of students, including their mental and emotional health (American Council on Education, 1949). However, U.S. colleges and universities have seen a marked increase in the number and severity of students experiencing various traumas that severely impact their ability to learn and function in the academy (Locke & Stauffer, 2015, RAINN, 2016, Suicide Prevention Resource Center, 2014). These traumas may include, but are not limited to, severe mental health issues, alcohol and/or drug dependency, physical violence, racialized trauma, sexual assault, or familial crises (Lynch & Glass, 2017, Silverman & Glick, 2010). Research in other helping professions, such as K-12 education, nursing, counseling, and social work, have highlighted the ripple effect that trauma has on those who are charged with supporting individuals who experienced these traumas, however, higher education researchers have yet to fully explore this topic (Bride, Robinson, Yegidis, & Figley, 2004, Galek, Flannelly, & Greene, 2011, Hydon, 2015, Lynch & Glass, 2017, Whitfield & Kanter, 2014). Given the increase in students seeking help through personal trauma, and the visibility and availability of student affairs practitioners, it follows that these professionals may also be vicariously impacted. In this study, I aim to investigate the impact of being a professional helper within college student affairs by exploring
the lived experiences of individuals who have worked with students experiencing trauma. This chapter includes a cursory overview of scholarly and practitioner-based understandings of trauma, secondary traumatic stress, and the function of college student personnel, also known as student affairs professionals. I will further highlight specific research questions, methodologies, and implications of this study for the field of college student affairs and U.S. higher education.

Psychological Trauma and Secondary Traumatic Stress

Scholarly interest in the psychological impact of traumatic events is relatively new. Prior to the 1980s, the psychological impact of trauma was assumed to be due to factors inherent within an individual (Friedman, 2016, American Psychiatric Association, 2013). Yet events of the early to mid-twentieth century, such as World War I & II, the Holocaust, and the Vietnam War, ignited scholarly interest in the nature of trauma and its impact on the human psyche (Friedman, 2016).

While the recognition of illnesses such as Post-Traumatic Stress Disorder (PTSD) has advanced care in the area of psychology and counseling, it has also led to an ever-evolving debate regarding the defining characteristics of trauma (May & Wisco, 2016, Sorsoli, 2007). With each iteration of the Diagnostic and Static Manual of Mental Disorders (DSM), criteria for trauma, and what constitutes a traumatic event, has changed (Weathers & Keane, 2007). The current definition of trauma, provided in the DSM-V, specifies that a traumatic event must threaten physical harm or death to an individual or the loved one of an individual (American Psychiatric Association, 2013). Weather & Keane (2007) provide a comprehensive and succinct overview of the history of this debate, specifically regarding the development of the DSM definition. The authors call attention to the nebulous nature of psychological trauma, and the hazards of constricting trauma to previous assumptions of threat of bodily harm or death. They
also weigh the diagnostic implications of broadening this definition to include perceived traumas that were not life threatening. Another compelling argument for the expansion of the diagnostic definition of trauma comes from Sorsoli (2007). Sorsoli explores trauma through the lens of racism, including the collective effects of macroaggressions, systemic oppression, and the lingering traumatic impact of slavery on the Black community.

Despite the vigorous debate around what constitutes trauma, researchers seem to be in agreement that traumatic events not only have the potential to cause severe negative psychological effects on individuals who directly experienced it, but may also result in secondary and tertiary effects for individuals linked to the primary trauma victim (Barnes, 2013, Cieslak et al., 2013, Devilly, Wright, & Varker, 2009, McCann & Pearlman, 1990). The DSM-V identifies negative reactions to trauma, such as PTSD, as having significant negative impacts on an individual's ability to perform occupational and life tasks (American Psychiatric Association, 2013). Symptoms may include intrusive thoughts regarding the traumatic event, negative alterations to cognition or mood, avoidance of people, places, or things that trigger memories of the event, and changes in emotional arousal and reactivity (American Psychiatric Association, 2013). While not everyone may have a severe negative response to a traumatic event, scholars have identified evidence suggesting that racial minorities, LGBT individuals, immigrants, and women are more likely to suffer negative trauma reactions than other groups (American Psychiatric Association, 2013). Additionally, the primary trauma victim may not be the only individual to suffer negative consequences. Recent scholarship has attempted to describe the impact of trauma on those working with primary trauma victims. This phenomenon has been coined secondary traumatic stress, or “the stress resulting from helping or wanting to help a traumatized or suffering person” (Figley, 1999, p. 10). However, it is important to recognize that
current interpretations of secondary trauma only apply to individuals who have significant and personal, emotional connections to the primary victim, or repeated exposure to trauma victims as a part of an individual's occupation. That is to say, a person who is exposed to a traumatic event by watching television or reading the newspaper would not be considered at risk for developing secondary traumatic stress, whereas, someone who directly works with victims of hate crimes, would be considered at risk.

While traumatic events can occur anywhere and to anyone, the focus of this investigation is on professional staff members who work in student support roles within U.S. higher education. Therefore, it is important to understand some of the most common student-traumas that college student personnel may encounter. For example, recent national attention has centered on increased investigation of sexual violence on college campuses, as well as negative racial climates on college and university campuses. Using a more conservative definition of trauma, from the DSM-V, students experiencing sexual violence may meet the criteria for an illness such as PTSD, but those experiencing hate-crimes or bias may not (American Psychiatric Association, 2013). Given the broad spectrum of traumas experienced by college students, I use a broader definition of trauma in order give voice to a range of traumatic events student affairs professionals may encounter in their roles. Using this broader definition of trauma, student experiences related to natural disasters such as hurricanes and earthquakes, man-made disasters such as building fires, campus bias-related incidents, campus violence/shootings, death of loved ones, and student veterans returning from war may all meet the criteria for trauma.

This section served as a brief descriptive summary the concept of psychological trauma and its relation to U.S. higher education. In the next section, I explore the ripple effects of
trauma, including current scholarly understanding concerning the impact of student trauma on college student personnel.

**Burnout, Secondary Trauma, and Compassion Fatigue in Student Affairs**

Although many student affairs professionals find fulfillment and purpose in their work with college students, scholars have long acknowledged the intense stress that accompanies this work (Berwick, 1992, Skipper, 1992, Ward, 1995). Job related stress in student affairs has been shown to correlate with a number of negative outcomes including poor health, decreased satisfaction with personal relationships, decreased sleep and sleep quality, and decreased job satisfaction (Skipper, 1992). Recently, there has been a resurgence of interest in the factors that lead to the attrition of student affairs professionals, one factor being job-related stress (Rosser & Javinar, 2003, Stoves, 2014, Tull, 2006). Given the cost of professional preparation, professional development, recruitment, and training, it is understandable why this phenomenon is of interest to scholars and organizational leaders.

In the higher education literature, researchers and practitioners have been primarily concerned with two stress-related outcomes: burnout and compassion fatigue (Howard-Hamilton, Palmer, Johnson, & Kicklighter, 1998, Hoy 2014, Rosser & Janvinar, 2003, Stoves, 2014, Tull, 2006). For the purposes of this study, burnout may be defined as, a prolonged three-dimensional response to job stressors, encompassing exhaustion, cynicism, and inefficacy (Cieslak et al., 2014, p. 76). Compassion fatigue may be defined as deep physical and emotional exhaustion and a pronounced change in the helper’s ability to feel empathy for their patients, their loved ones, and their co-workers (Thompson, Amatea, & Thompson, 2014, p. 1). While these outcomes are certainly of concern, another correlated factor that has not been interrogated within the context of higher education professionals is secondary trauma (Anderson, Benight, Bock, Cieslak, & Shoji,
This has created a gap in understanding, as some schools portray secondary trauma as a foundational impetus for compassion fatigue, as well as organizational trauma, if left unaddressed (Barnes 2013, Shoji et al. 2015, Stoves, Thompson, Amatea, & Thompson, 2014).

Current research on the topic of burnout and compassion fatigue in student affairs work has not fully explored various risk factors associated with these phenomena, though some scholars have indicated that female-identified individuals are at greater risk of burnout compared to their male-identified counterparts (Howard-Hamilton, Johnson, & Kicklighter, 1998).

**Statement of the Problem**

The severity and frequency of mental health issues impacting college students in the United States has greatly increased (Locke & Stauffer, 2015, Suicide Prevention Resource Center, 2014). This has led to overwhelming caseloads, limiting university mental health professionals’ ability to effectively meet the needs of current student bodies (Barreira & Snider, 2010, Kay & Schwartz, 2010). Historically, college student affairs personnel have played a crucial role in student development, support, and success. Today, these professionals have found themselves increasingly acting in the capacity of first responders for various student mental health crises (ACHA, 2015, Blaine & McArthur, 1971, Kraft, 2011, Robertson, 1966, Thwing, 1926). Literature in other helping professions such as social work, K-12 education, and counseling all indicate that repeated and extreme exposure to, or details of the exposure to, traumatic events can have a significant negative impact on the mental health and wellbeing of professional helpers (Bride, Robinson, Yegidis, & Figley, 2004, Galek, Flannelly, & Greene, 2011, Hydon, 2015, Whitfield & Kanter, 2014). Currently, literature centered on individuals working in college student affairs does not directly address the issue of secondary traumatic stress. It is the aim of this study to begin a dialogue regarding the impact of secondary trauma on
student affairs professionals by exploring this phenomenon through the lived experiences of professionals who have been impacted by their work with students experiencing trauma.

**Purpose of the Study**

Although the college experience is often seen as a time for self-growth, learning, and exploration, students may also be exposed to situations and environments that result in psychological trauma (Fisher & Sloan, 2013, Wilson, 1996). Recent media attention has highlighted numerous traumatic events on college campuses including an increase in gun-related violence, social-identity-based discrimination, and sexual assaults. One only needs to cross reference “college” and “racism, sexual violence, or campus shootings” through an internet search engine to produce hundreds of examples of media coverage. Campus staff, faculty, and administrators are often called to support these students through their trauma, as well as develop environments and processes that aid students in successfully completing their degrees (Reynolds, 2011, Roberts, 2012). However, scholars in other helping professions, including K-12 education, have described the potential ripple effect these traumas have on those charged with supporting traumatized individuals (Baird & Kracen, 2006, Hydon, 2015, & Lipsky & Burk, 2009). To date, this line of inquiry has not been applied to higher education professionals, specifically those directly working with students such as student services employees. This study aims to explore the concept of secondary trauma in U.S. college student affairs professionals and seeks to address the three research questions outlined below.

**Primary Research Questions**

The purpose of this study is to investigate the impact of secondary trauma in Student Affairs Professionals working in U.S. colleges and universities. To guide this study, I focused on the following research questions:
**Question 1.** How does secondary traumatic stress manifest in student affairs professionals who work with U.S. college students who have experienced trauma?

**Question 2.** What impact does working with students who have experienced trauma have on student affairs professionals?

**Question 3.** How do student affairs professionals, who work with college students in the U.S. experiencing trauma, make meaning of the trauma their students experience?

**Summary of Research Design**

In order to investigate the impact of secondary traumatic stress in higher education, I employed a qualitative-intensive, mixed methods approach that included the development of a secondary traumatic stress assessment and use of a phenomenological research design supplemented by arts-based research practices. Thirty co-researchers were selected using purposeful and criterion sampling (LeCompte, Preissle, & Tesch, 1993, Merrian, 2009). Co-researchers were required to be employed full-time in a student services office, as defined by the Council for the Advancement of Standards (CAS), a full-time faculty member in a higher education or college student personnel graduate program, or a person currently employed as a graduate assistant in a CAS-defined student services department (Wells, 2015). Additionally, co-researchers must have completed the *Secondary Trauma in Student Affairs Professionals Scale* (Lynch & Glass, 2017).

Once selected, co-researchers were asked to complete a brief self-directed visual art project. This project served as a method for attending to the Epoche and bracketing processes identified by Moustakas (1994), in which the researcher and co-researchers explicitly identify assumptions and biases related to the phenomenon at hand and set parameters regarding the phenomenon. While this project was intended to be primarily self-directed, there were a limited
number of constraints placed upon the visual-representation projects. First, co-researchers were asked to convey three ideas through their art: 1) The traumatic event(s) in which they have acted in a support role, 2) Their emotions when recalling their work with students experiencing trauma, and 3) The meaning they have made of the trauma experienced by their students. Second, co-researchers were asked to avoid using personal photos of other people in their artwork, as their art would be included in the final published manuscript. Finally, co-researchers were instructed to take a clear photograph of their final product to submit for analysis.

Upon receipt of their final visual-representations, I scheduled an interview with each co-researcher. Interviews were used to gather information regarding their experiences with supporting students through various traumas, their own direct experiences of trauma, how their work has been impacted by their role of as professional helper, and their meaning making process in regards to supporting students experiencing trauma. Upon completion of the art projects and interviews, I used the photos of co-researcher artwork, interview field notes, and interview transcripts to embark on a phenomenological analysis of the data. This process included the acts of phenomenological reduction and imaginative variation in order to identify invariant and structural themes (Moustakas, 1994). These themes were then used to develop a meta-analysis of the essence of secondary traumatic stress within college student affairs work.

**Significance of the Study**

This study has the potential for significant impact on how leaders, scholars, and practitioners in college student affairs conceptualize the preparation and support of these professionals. Below, I have briefly highlighted both practical and theoretical implications resulting from this study.
Practical implications. This study has the potential for wide-reaching practical application. Perhaps the most direct impact it may have is on creating cultures of support and professional development within various student affairs departments. However, information gleaned from this study may also be useful in the contexts of graduate preparation programs, as the experiences highlighted in this study could help inform curriculum development and skill training in higher education programs. On a macro-level, policy and practice may be better informed through the lens of workers’ compensation policy, union practices, or even a more detailed articulation of trauma stewardship as a nationally recognized professional competency.

Theoretical implications. In addition to a wide range of practical applications, this study may also identify a new and crucial niche in higher education research. The impact of secondary trauma in higher education is an emergent phenomenon, and scholars may choose to extend the discussion by creating additional studies addressing personal contexts and environmental factors that contribute to secondary trauma in student affairs professionals, as well as student workers who may be considered crisis first responders. Additionally, longitudinal studies may paint a more holistic picture of how secondary trauma develops, continues, and/or subsides within the context of higher education and college student affairs. Finally, future discussion about the impact of supervisory support may be a logical next step in understanding how to mitigate secondary trauma in student affairs professionals.

Assumptions, Limitations, and Scope

While care was taken to ensure the rigor of this study, this study was not without limitations. One major limitation of all qualitative research is the inability to generalize results to broad populations due to small sample sizes and contextualization of narrative based data. However, results of this study will still be valuable as researchers and practitioners may interpret
the results within the context of their own areas of interest or populations. Additionally, the subjective nature of phenomenological analysis lends itself to be impacted by researcher bias, despite efforts made through explicitly stating researcher backgrounds and biases. Finally, participation in the study required co-researchers to recall memories over a long period of time. These memories may have been distorted by time, and because the focus of this research is on secondary trauma, participants may have been inclined to censor their responses to avoid negative emotions related to their memories.

**Chapter Summary**

Due to the nature of U.S. college student affairs, the field may be categorized as a helping profession (Reynolds, 2011). However, unlike other helping professions such as counseling and social work, scholars and practitioners have not adequately assessed the impact of student affairs work on practitioners. One such area that has yet to be explored in depth is that of secondary traumatic stress, defined as “the natural, consequent behaviors and emotions resulting from knowledge about a traumatizing event experienced by a significant other...the stress resulting from helping or wanting to help a traumatized or suffering person” (Figley, 1999, p. 10). This chapter introduced the concepts of trauma, secondary traumatic stress, and the impact of student affairs work on student affairs practitioners. It also highlighted the need for exploration regarding the impact of secondary traumatic stress in U.S. student affairs practitioners, laying out a series of research questions and a summary of methodological approaches being used to answer these questions.

In the chapters that follow, I present a more detailed discussion of the points outlined in this chapter. Chapter 2 will serve to paint a vivid picture of psychological trauma on U.S. college campuses, the role of student affairs practitioners acting as trauma stewards, the impact of
trauma stewardship on student affairs practitioners, and gaps in understanding regarding secondary traumatic stress as it applies to these professional helpers. Chapter 3 is used to map how the research questions, presented in this chapter, were answered using a mixed methods approach employing self-assessments, phenomenology, and arts-based research practices. Chapter 4 contains the results of this study, highlighting key themes that emerged from participant interviews and visual art projects. Finally, Chapter 5 explores how the results of this study may answer the stated research questions, limitations of this study, detailed implications for policy and practice, and future areas for exploration.
CHAPTER 2: REVIEW OF THE LITERATURE

“Here we are in a field of residence hall managers, student activities coordinators, Greek life directors and other assorted student affairs specialists, all trained extensively on exactly what to do should a student display suicidal ideations, and yet we are ill-equipped to talk about our own fragile place in this college landscape” (Schneck, 2013, p. 1).

In Chapter 1, I presented a general outline for this study including a brief review of current perspectives on the topic of secondary traumatic stress and student affairs work, as well as a methodological roadmap for how I intended to address the research questions that were presented. The purpose of this chapter serves to situate this study within the context of the literature addressing psychological trauma, secondary traumatic stress, and student affairs work. Cross disciplinary scholarly, practical, and contextual discourses from the fields of higher education, counseling, psychology, and social work are explored in order to triangulate gaps in understanding of the phenomena of secondary traumatic stress, as well as undergird the necessity of answering the questions posed in this study.

The first half of this chapter features a discussion on the current debate on the definitions and boundaries of psychological trauma, provides examples of common traumas in U.S. collegiate environments, and connects secondary traumatic stress with the constructs of burnout and compassion fatigue. The second half of this chapter then explores the impact of secondary traumatic stress on those who work in helping professions, defines student affairs work within the framework of helping professions, and presents current understandings of how student affairs work impacts current professionals. The chapter concludes in a summary of how this study may
extend the scholarship presented here, as well as address gaps in understanding regarding secondary traumatic stress in U.S. college student affairs professionals

**Exploring Psychological Trauma**

For college students, the time spent in and out of the classroom can be a transformative period of their lives. Hallmarks of the college experience may include developing a greater sense of self, uncovering passions and curiosities, and expanding worldviews (Roberts, 2012, Schuh, Jones, & Harper, 2011). Yet, for some students, the college experience may represent a period of psychological trauma induced by a myriad of events or circumstances (ACHA, 2015, Kadison, 2004, Kraft, 2011, Reynolds, 2009). Given that this study centers on the concept of secondary traumatic stress, it is important to have a theoretically grounded understanding of what constitutes a traumatic event. In this section, the concept of trauma will be dissected through a discussion of the history of trauma, various scholarly definitions of trauma, the disproportionate impact of trauma, and how trauma manifests in U.S. higher education.

**Understanding trauma.** Scholars of counseling and psychology have spent decades attempting to identify the boundaries of psychological trauma (American Psychiatric Association, 2013, May & Wisco, 2016, Pearlman & Saakvitne, 1995, Weathers & Keane, 2007). Less than a century ago, mental health professionals believed that negative reactions to psychological trauma only occurred in individuals who had previously diagnosed or undiagnosed mental health disorders (May & Wisco, 2016). In short, trauma only occurred in those with weakened psychological constitutions. However, by the mid-twentieth century, researchers and practitioners adopted an alternate perspective of this phenomenon, realizing that traumatic events have great potential to negatively impact the mental health of an individual, regardless of existing mental health conditions (May & Wisco, 2016). Since then, researchers have
concentrated on understanding what constitutes a traumatic event versus everyday hassles, as well as understanding the wide-ranging impact of trauma on the human psyche (May & Wisco, 2015, Weathers & Keane, 2007).

Currently, the fifth edition of the Diagnostic and Statistical Manual for Mental Disorders (DSM-V) sets a narrow standard for what is considered to be a traumatic event. According to the DSM-V, traumatic events may include: a) threatened or actual physical assault, b) threatened or actual violence, c) natural or [manmade] disasters, d) sudden catastrophic events, e) observing threatened or serious injury, unnatural death, physical or sexual abuse, domestic violence, suicide or suicide attempt, serious accident or injury, additionally, the stressor must be interpersonal and intentional (American Psychiatric Association, 2013). While this definition is fairly narrow, the definition has gone through periods of expansion and narrowing throughout its inclusion in the DSM (May & Wisco, 2015, Weathers & Keane, 2007). In their historical critique, Weathers & Keane (2007) provide an excellent summary and discussion of the evolution of trauma in the DSM starting with its inclusion as an impetus for diagnosable disorders in the 1980 DSM-III, when trauma was simply defined as the “existence of a recognizable stressor that would evoke significant symptoms of distress in almost everyone” (Weathers & Keane, 2007, p. 108). Their critique presents both sides of the current debate on the expansion or narrowing of what qualifies as a traumatic event, highlighting how changing criteria can significantly impact the number of people being diagnosed with disorders such as PTSD or limiting access to care for other individuals.

In recent years, scholars have explored trauma from non-traditional viewpoints. For instance, Shalev (2002) took a perspective reminiscent of the pre-DSM discourse on trauma, asserting that events alone are not traumatic, rather events become traumatic based upon how an
individual reacts to the event and their susceptibility to trauma. Other researchers have highlighted various nuances in the development of negative trauma outcomes. May & Wisco (2016) and Herman (1992) pointed out that an individual's development of trauma related mental illness may result from their proximity to the traumatic event (psychically or emotionally) or the cumulative effects of experiencing multiple traumas or sustained experiences of trauma. Still, these perspectives leave questions of thresholds for traumatic experiences, such as what is the proximal tipping point, or number of events, that lead to psychological trauma within an individual.

Additionally, studies intersecting issues of racism and psychological trauma have emerged in the psychological and sociological literature. For instance, Sorsoli (2007) builds on the Harvey (1996) study, describing the impact of institutional racism through the lens of traumatic stress, or Myhra & Wieling’s (2014) study of the intergenerational impact of trauma experienced by Native Americans. Even in the sphere of public health research, scholars have connected the history of racism in the U.S. with contemporary negative outcomes for minoritized people. Sotero (2006) conceptualizes this notion, positing that through historical trauma theory, “…populations historically subjected to long-term, mass trauma—colonialism, slavery, war, genocide—exhibit a higher prevalence of disease even several generations after the original trauma occurred” (pg. 93). However, much of the current literature defining trauma through a racialized perspective uses qualitative methodologies. Quantitative analysis, however, could lead to a greater understanding of the generalizability of findings, as well as explorations of specific factors that may contribute to psychological trauma within minoritized communities.

For the purposes of this study, trauma will be defined as “the unique individual experience of an event or enduring conditions, in which the individual’s ability to integrate
[their] emotional experience is overwhelmed, or the individual experiences (subjectively) a threat to life, bodily integrity, or sanity,” while also acknowledging that trauma is developed via the interplay of the individual, the environment, and the traumatic event (Harvey, 1996, Pearlman & Saakvitne, 1995). Below, Table 1 contains a summary of the varying definitions of trauma and how psychological trauma develops.

Table 1

<table>
<thead>
<tr>
<th>Source</th>
<th>Definition</th>
</tr>
</thead>
<tbody>
<tr>
<td>American Psychiatric Association (1994)</td>
<td>The person has been exposed to a traumatic event in which both of the following were present: 1) the person experienced, witnessed, or was confronted with an event or events that involved actual or threatened death or serious injury, or a threat to the physical integrity of self or others, 2) the person’s response involved intense fear, helplessness, or horror.</td>
</tr>
<tr>
<td>American Psychiatric Association (2013)</td>
<td>[Trauma] must result from one or more of the following scenarios, in which the individual: 1) directly experiences the traumatic event 2) witnesses the traumatic event in person 3) learns that the traumatic event occurred to a close family member or close friend (actual or threatened, violent or accidental) or 4) experiences first-hand repeated or extreme exposure to aversive details of the traumatic event (not through media, pictures, television or movies unless work-related). The disturbance, regardless of its trigger, causes clinically significant distress or impairment in the individual’s social interactions, capacity to work or other important areas of functioning. It is not the physiological result of another medical condition, medication, drugs or alcohol.</td>
</tr>
<tr>
<td>Sorsoli (2007)</td>
<td>Views trauma through the lens of racism, as discrimination using the arguments of Harvey (1996)’s ecological trauma.</td>
</tr>
</tbody>
</table>
Events are never ‘traumatic’ just because they meet a threshold criterion. Extreme events become traumatic when the individual exposed is, for some reason, vulnerable to their effect.

These researchers use Herman (1992)’s concept of complex trauma to understand the intergenerational impact of racialized trauma for American Indian families, unpacking the ripple effects trauma may have on multiple generations of marginalized people.

Using the DSM-IV definition of trauma, these authors expand the understanding of trauma by emphasizing the impact of an individual's proximity and level of exposure to a traumatic event.

Trauma does not happen in a vacuum. Instead, traumatic events occur within an ecological system that impact individuals differently as a result of interplay between the event, the person, and the environment.

Psychological trauma is the unique individual experience of an event or enduring conditions, in which the individual’s ability to integrate his/her emotional experience is overwhelmed, or the individual experiences (subjectively) a threat to life, bodily integrity, or sanity.

[Complex trauma] involves individuals who have suffered ongoing abuse, which can include domestic, sexual, or political abuse. Symptomology may include: a) symptoms that are more complex, diffuse, and tenacious than simple PTSD, b) personality changes, including deformations or relatedness and identity, and c) vulnerability to repeated harm, both self-inflicted and by others.

Trauma and the U.S. College Student. While traumatic events have always occurred on U.S. college and university campuses, the rate of traumatic incidents has seemed to increase in recent years (Fisher, Cullen, & Turner, 2000, Sanburn, 2015, Silverman & Glick, 2010). Some may argue that these events are not increasing, but advances in media technology and coverage have led to more reporting of long-existing traumatic events. Yet others point to ecological conditions contributing to increased trauma, such as the increased rate of children seeking mental health counseling and use of psychotropic medications (Reynolds, 2009). Environmental conditions have also extended to social policies that address or have led to the potential increase of trauma-inducing events or environments on college campuses. The policies include
affirmative action, the Jeanne Clery Disclosure of Campus Security Policy and Campus Crime Statistics Act of 1990 (Clery Act), and the Americans with Disabilities Act of 1990 (ADA). These policies have increased access to higher education without simultaneously encouraging the inclusion and safety of student populations that have been historically excluded from, or marginalized within, the academy (Reynolds, 2009). Silverman (2010) identified nine common crisis situations that college students experience including: a) loss of loved ones, b) academic crisis, c) developmental issues, d) suicidal ideation and behavior, e) anxiety, depression, and psychosis, f) loss of control, g) impulse control, and h) physical or emotional trauma such as domestic and sexual violence, or i) natural disasters. In the sub-sections that follow, three of these frequently researched crises are explored.

*Mental health.* Perhaps one of the most widely experienced traumas for college students is severe and/or chronic mental illness. Historically, college and university leaders have recognized the academic stressors and developmental challenges that college students face and have attempted to curtail severe negative mental health consequences (Barreira & Snider, 2010, Kraft, 2011, Seigel, 1968). As early as 1926, institutions such as Yale University created positions analogous to contemporary counseling centers, and media outlets covered stories related to student suicide as early as 1970 (Farber, 1970, Kraft, 2011, Robertson, 1960, Thwig, 1926). A 2015 report by the Center for Collegiate Mental Health reported that in the last five years, demand for student counseling center services has increased five times faster than average institutional enrollment, and the number of students seeking counseling are experiencing suicidal ideation at a growing rate (Center for Collegiate Mental Health, 2015). This finding is troubling as student suicide still remains a leading cause of death for collegians (Suicide Prevention Resource Center, 2014).
Although student mental health concerns are not new in U.S. higher education, practitioners and researchers have agreed that the rate and severity of mental health crises have rapidly increased in the past thirty years (ACHA, 2015, Ghallagher, 2012, Kay, 2010, Reetz & Mistler, 2014, Reynolds, 2009). However, as indicated above, services have not kept up with demand (Center for Collegiate Mental Health, 2015, Kraft, 2011, Spano, 2011). Because student crises have become more prevalent and varied, those higher education professionals working in student affairs roles are often called to act as first responders, in triage capacities, or as pseudo-counselors (Pope, Reynolds, & Mueller, 2004, Siggins, 2010). Unfortunately, many student affairs preparation programs do not provide the requisite training to deal with these issues (Spano, 2011). Spano (2011) insightfully frames the issue stating, 

While many student affairs preparation programs offer courses in basic counseling skills, these are often aimed to help practitioners relate to students in informal arenas, advise residence hall and other student staff, and enhance basic relationship-building skills to strengthen practitioners' interactions with collegians. Those entrusted with actual counseling work in higher education obtain their professional training in counseling or, increasingly, in clinical psychology programs, or schools of social work, which may but typically do not have formal affiliations with student affairs preparation programs, and where the identification and treatment of mental disorders is of paramount importance (p. 318).

An inadequate counseling workforce coupled with a lack of appropriate training for existing college student personnel and the sustained mental health crises on college campuses leaves the potential for numerous occurrences of psychological trauma that may go unaddressed or become inadvertently exacerbated.
Racialized trauma.

“…[On] college campuses a survey found that 66 percent of White students felt there were no racial problems on their campus, while 80 percent of minority students said there were. The National Institute Against Prejudice and Violence recorded over three hundred incidents of racial violence or harassment against Blacks, Hispanics, and Asians on campuses as well as many incidents of anti-Semitism and sexual harassment. They also noted that the majority of incidents go unreported…Minorities in American society are crying out against racism, inequality, and injustice, while majority citizens are saying ‘Hey, everything is fine! What's all the complaining about?’ These erroneous perceptions and attitudes are the major impediment to achieving real cultural diversity in American society” (Wilson, 1996, p. 6).

At first glance, this quote may appear to be taken from a recent report on campus climate. In fact, it came from a 1996 About Campus article, by Reginald Wilson, entitled Educating for Diversity. Twenty years have passed since Wilson challenged U.S. institutions of higher education to “require nothing less than a complete transformation…reinventing everything, from the canon to the classroom and beyond” (p. 4), in order to effectively serve an ever-diversifying student demographic. Yet recent college student uprisings across the U.S. are evidence of the continued battle that students of color fight as they seek equitable education environments at their institutions (Dickey, 2016).

As pointed out by Sorsoli (2007) and Myhra & Wieling (2014), trauma has been linked to experiences of racism and oppression. Race based stress has also been tied to several negative personal outcomes such as low self-esteem, difficulty concentrating, and increased risk for physical and psychological illness (Reynolds, 2009). Even the DSM-V notes that individuals of
marginalized identities such as women, racial minorities, and LGBT people are at greater risk of developing illnesses such as post-traumatic stress disorder (American Psychiatric Association, 2013). Student experiences of marginalization and racism may be exacerbated on college campuses, as the history of U.S. higher education has been steeped in racism and the exclusion of potential students who were not land-owning, white, straight, Christian, cis-gender, and/or male (Dunster 2009, Geiger, 2011).

**Sexual violence.** The legal definition of sexual assault and other forms of sexual violence can be ambiguous, differing from state to state. However, for the purposes of this study, sexual violence refers to the spectrum of unwanted and nonconsensual sexual advances that ranges from verbal sexual harassment to rape (RAINN, 2016).

One in five women and one in sixteen men will be victims of sexual assault during their college career, and 90% of these victims will not report their assault (Fisher, Cullen, & Turner, 2000, Krebs, Lindquist, Warner, Fisher, & Martin, 2007). Within the last few years, national attention has focused on this epidemic and has led to numerous lawsuits and federal investigations across the country. The trauma of sexual assault can be severe and long-lasting, with some victims taking years to recover (American Psychiatric Association, 2013, RAIN, 2016). Hanson (1990) investigated the impact of sexual violence, underscoring its link to PTSD symptomology, including self-blame, distorted and negative cognitions, intrusive thoughts, and increased negative emotional arousal. Symptoms can also manifest in the form of eating disorders, substance abuse, psychological dissociation, and suicide (RAINN, 2016).

**Secondary Traumatic Stress**

As discussed in the sections above, most of the literature on traumatic stress has centered on the experience of trauma from the perspective of the individual who experienced the
traumatic event. However, as Lipsky & Burk (2009) assert, trauma more so resembles a rock thrown into a pool of water, creating a ripple effect. Whether it is the impact on the loved ones of trauma victims, their professional caregivers, or even helping organizations, trauma touches many more individuals than just the primary trauma victim. In this section, I will discuss one of these varied impacts through the lens of caretakers and professional helpers, a phenomenon known as secondary traumatic stress.

**Defining Secondary Trauma.** Originally coined vicarious trauma, secondary traumatic stress, has been described as “the natural, consequent behaviors and emotions resulting from knowledge about a traumatizing event experienced by a significant other...the stress resulting from helping or wanting to help a traumatized or suffering person” (Figley, 1999, p. 10, McCann & Pearlman, 1990).

Much like primary trauma victims, those experiencing negative reactions to secondary traumatic stress display symptoms that impair their day-to-day personal and vocational functions. These symptoms are in alignment with those displayed in individuals experiencing PTSD (American Psychiatric Association, 2013). Again, mirroring the impact of primary trauma responses, secondary traumatic stress has been shown to disproportionately impact individuals possessing marginalized identities, such as people of color, women, and LGBT individuals (American Psychiatric Association, 2013).

**Symptoms of post-traumatic stress disorder (PTSD).** The DSM-V does not directly name secondary traumatic stress, although it does give guidance in diagnosing those who are witness to primary trauma victims or repeated details of traumatic events, while serving a vocational or occupational capacity. Table 2 describes symptom criteria that meets standards for the DSM-V in regards to PTSD (Lynch & Glass, 2017).
### Table 2

<table>
<thead>
<tr>
<th>Symptom</th>
<th>Requirement</th>
<th>Criteria</th>
</tr>
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</table>
| Intrusion        | Individual must show signs of at least one criteria. | • Recurrent, involuntary, and intrusive distressing memories of the traumatic event(s)  
• Recurrent distressing dreams in which the content and/or effect of the dream are related to the traumatic event(s)  
• Dissociative reactions (flashbacks) in which the individual feels or acts as if the traumatic event(s) were recurring.  
• Intense or prolonged psychological distress at exposure to internal or external cues that symbolize or resemble an aspect of the traumatic event.  
• Marked physiological reactions to internal or external cues that symbolize or resemble an aspect of the traumatic event(s) |
| Avoidance        | Individual must show signs of at least one criteria. | • Avoidance of or efforts to avoid distressing memories, thoughts, or feelings about or closely associated with the traumatic event(s)  
• Avoidance of or efforts to avoid external reminders (people, places, conversations, activities, objects, situations) that arouse distressing memories, thoughts, or feelings about or closely associated with the traumatic event(s) |
| Negative Change  | Individual must show signs of at least two criteria. | • Inability to remember an important aspect of the traumatic event(s)  
• Persistent and exaggerated negative beliefs or expectations about oneself, others, or the world  
• Persistent, distorted cognitions about the cause or consequences of the traumatic event(s) that lead the individual to blame themself or others  
• Persistent negative emotional state  
• Markedly diminished interest or participation in significant activities  
• Feelings of detachment or estrangement from others |
| in Cognition and Mood | | |

*DSM-V PTSD Criteria*
Persistent inability to experience positive emotions

- Irritable behavior and angry outbursts (with little or no provocation) typically expressed as verbal or physical aggression toward people or objects
- Reckless or self-destructive behavior
- Hypervigilance
- Exaggerated startle response
- Problems with concentration
- Sleep disturbance

**Other requirements.** It should be noted that the symptoms listed above must occur for at least one month and be a direct result of exposure to trauma victims or details regarding trauma victims within an individual’s line of work. However, only a licensed mental health professional may make an official diagnosis of any mental illness.

**Secondary Trauma, Burnout, and Compassion Fatigue**

Before discussing the impact of secondary traumatic stress on professional helpers, it is important to understand two other related, but distinct constructs often misused synonymously with secondary, or vicarious, trauma: *burnout and compassion fatigue.*

**Burnout.** Much like STS, the definition and criteria of burnout have continuously been contested within literature related to psychology, counseling, and organizational theory. This study defines burnout as, “…a state of physical, emotional, psychological, and spiritual exhaustion resulting from chronic exposure to (or practice with) populations that are vulnerable or suffering” (Newell & MacNeil, 2011, p. 58). Newell & MacNeil (2011) goes on to describe three domains of impact caused by burnout: emotional exhaustion, depersonalization, and reduced sense of personal accomplishment. Similarly, but somewhat more generally, Galek et al. (2011) state that burnout results from, “…the confluence of interpersonal and institutional
sources of occupational stress” (p. 634), and is a distinct outcome of difficult work environments, where burnout may occur in individuals who do not work specifically with victims of trauma. Although very similar in nature, one key factor that separates burnout from STS is the mirrored symptomologies between STS and PTSD (Galek et al., 2011).

**Compassion fatigue.** Also closely related to STS and burnout is the concept of *compassion fatigue.* This condition may be thought of as the combination of secondary traumatic stress and burnout (Newell & MacNeil, 2011). In Figure 1, Barnes (2013) illustrates the interplay between trauma, secondary trauma, burnout, and compassion fatigue. Due to the necessity of the constant need for empathy, compassion fatigue may be thought of as both the emotional and physical fatigue of working with individuals who are suffering (Newell & MacNeil, 2011, Figley, 2002).

![Figure 1. Continuum of Traumatic Stress, Barnes (2013). This figure illustrates the ripple effect of trauma from the primary trauma victim through the organizational level.](image-url)
Impact on Professional Helpers

One key feature in diagnosing secondary traumatic stress (STS) involves an individual being exposed to the victim of the primary trauma, or details related to the trauma, through their vocation (American Psychiatric Association, 2013). Those working in so-called helping professions, such as nursing, law enforcement, and emergency services, may be particularly at risk for developing STS symptomologies (Cieslak et al, 2013, Hensel, Ruiz, Finney, & Dewa, 2015). Okun (2002) described helpers as those who help others understand, cope, and deal with their problems. She further differentiated helpers into three categories: professional helpers, generalist human service workers, and nonprofessional helpers. Table 3 provides a brief description of each type of helper.

Table 3

<table>
<thead>
<tr>
<th>Helper Type</th>
<th>Description</th>
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</thead>
<tbody>
<tr>
<td>Professional Helper</td>
<td>• Undergoes extensive graduate-level training in human behavior, applied helping strategies, and experienced supervised clinical training</td>
</tr>
<tr>
<td></td>
<td>• Credentialed and requires continuing education requirements</td>
</tr>
<tr>
<td></td>
<td>• Examples may include psychologists, mental health counselors,</td>
</tr>
<tr>
<td>Generalist Human Services Worker</td>
<td>• Receives specialized human relations training at the undergraduate level.</td>
</tr>
<tr>
<td></td>
<td>• Works on teams with professions or consults available professionals</td>
</tr>
<tr>
<td></td>
<td>• Day to day service providers that have the most contact with those being helped</td>
</tr>
<tr>
<td></td>
<td>• Examples may include psychiatric aides or technicians, youth street workers, substance abuse counselors, daycare staff, probation officers, supervisors and managers, human resource personnel, hospice workers, and church workers.</td>
</tr>
</tbody>
</table>
Nonprofessional Helper

- Receives no formal training, but may have attended seminars or other types of educational opportunity
- Provides helping assistance in formal capacities
- Examples may include interviewers, supervisors, and teachers.

The helping profession type most closely related to the topic of this study, that is student affairs professionals, fall somewhere between professional helpers and generalist human services workers. While student affairs professionals receive extensive graduate training, the field does not require clinical supervision or certification, however, these individuals are often the staff that are in most frequent contact with students, and consult licensed professionals when needed. Those working in these fields are exposed to a constant and varied spectrum of primary traumas and details of those traumas as they support individuals dealing with death, homelessness, sexual violence, natural disasters, abuse, severe mental health disorders, and chronic hunger (Baird & Kracen, 2006, Hydon, 2015, McCann & Pearlman, 1990, Newell & MacNeil, 2010, Whitefield & Kantner, 2014). Scholars and practitioners in helping professions have long identified the potential of their work to induce secondary traumatic stress and have used both quantitative and qualitative methodologies to explore this phenomenon in professional helpers (Cieslak et al 2013, Crumpei & Dafinoiu, 2012, Devilly, Wright, & Varker, 2009, Shoji et al, 2015). In their meta-analysis of risk factors for secondary traumatic stress, Hensel et al. (2015) found significant positive correlations in secondary traumatic stress among therapists based on caseload volume, frequency of interaction with trauma victims, ratio (client to therapist), personal trauma history, and social support. They also found negative correlations between self-reported levels of secondary traumatic stress in therapists and perceived social support. These risk and resiliency factors were evidenced in other studies as well (Anderson, Bock, Cieslak, & Shoji, 2012, Cieslak
et al, 2013). Additional factors that were found to impact the magnitude of secondary traumatic stress include levels of empathy in caregivers, as well as self-efficacy in regards to a practitioner’s ability to deal with the trauma of clients (Crumpei & Dafinoiu, 2012, Cieslak et al, 2013). Although most studies concerning secondary traumatic stress focus on those addressing mental health issues, Hydon et al. (2015) explored how this phenomena manifests in U.S. K-12 teachers. They found that common symptoms may include fatigue, emotional detachment, behavioral changes, diminished concentration, interpersonal withdrawal, existential questioning, and poor work performance.

It is clear that secondary traumatic stress can have a severe negative impact on those working to reduce the psychological stress of primary trauma victims. In recent years, the concept of secondary trauma has been adopted by researchers in a wide variety of disciplines related to helping professions. These scholars have unpacked the phenomena of secondary trauma from several angles, both qualitatively and quantitatively. Yet while the STS literature provides broad understanding across professions, it does not provide deep understanding within specific helping professions. One profession that lacks both depth and breadth in this understanding is the field of college student affairs.

**Consequences of Student Affairs Work**

Student Affairs work is often described as a calling and a career path where professionals are intrinsically driven by their passion to help others, specifically college students (Clement, 2011, Guthrie, Woods, Cusker, & Gregory, 2005). It has also been included with other professions such as counseling, education, and social work as a helping profession (Reynolds, 2009, Reynolds, 2011). Between graduate preparation programs, national professional organization conferences, and campus-based professional development, student affairs
professionals have a number of theory-based best practices from which to ground their work. However, until recently, empirical research on the impact of their work on their own well-being has been sparse, focusing mainly on the concept of burnout or compassion fatigue.

Some of the earliest scholarship intersecting the topics of job burnout and student affairs work was completed by Forney, Wallace-Schutzman, & Wiggers (1982) where career development professionals were interviewed to examine individual factors that contributed to burnout. They pointed out the individualized nature of burnout and called for reform in how supervisors and departments recognize and intervene when employees show early warning signs of burnout. During the 1990’s several studies were published that advanced the understanding of how stress impacts job satisfaction and burnout in the field. Howard-Hamilton, Johnson, & Kicklighter (1998) published a widely cited study exposing the disproportionate impact burnout has along gender lines in student affairs. More recently, Stoves (2014) expanded on the higher education literature using Figley (1995) and Figley (2002)’s conceptualization of compassion fatigue. The author found several themes among his participants that described the emotional connection between students and professionals experiencing compassion fatigue. Unfortunately, these studies failed to account for secondary traumatic stress as a mediating factor for compassion fatigue and burnout (Barnes, 2013).

Although numerous studies have highlighted the prevalence of trauma in higher education, as well as the potential impact of secondary traumatic stress on professionals in helping roles, higher education has yet to formally investigate the phenomenon of secondary traumatic stress in student affairs professionals. The goal of the present study is to open a professional dialogue centered on secondary traumatic stress in higher education by first exploring the nature and essence of secondary traumatic stress through the lens of those who act
as caretakers to college students who experience trauma: U.S. college student affairs professionals.

Chapter Summary

The content of this chapter was meant to ground this study of secondary traumatic stress in U.S. college student affairs professionals within the broader context of trauma and secondary traumatic stress literature, its impact on helping professionals, and its impact on the work environment for student affairs professionals. Although the definition of trauma has been hotly debated among counselors and psychologists, I chose to adopt Pearlman & Saakvitne (1995)’s definition of trauma in order to encapsulate the broad spectrum of traumatic experiences that occur in college and university settings (American Psychological Association 1988, American Psychological Association, 1994, American Psychological Association, 2013, May & Wisco, 2015, Weathers & Keane, 2007). More specifically, Figgly (1999)’s definition of secondary traumatic stress was used as the primary lens for bounding the phenomena at hand.

The causes and impact of trauma on an individual’s mental health has been widely researched, yet the specific mechanisms and full scope of personal and occupational impacts of traumatic stress are still being uncovered (American Psychiatric Association, 2013, May & Wisco, 2016, Myhra & Wieling, 2016, Weathers & Keane, 2007). Scholars have recognized the disproportionate outcomes and ripple effects of traumatic events, as well as extending their study of psychological trauma to include those experiencing the vicarious impacts of this phenomenon, specifically in those who are considered to be professional helpers (McCann & Pearlman, 1990, Okun, 2002, Reynolds, 2009, Hensel, Ruiz, Finney, & Dewa, 2015). However, despite student affairs work falling under the umbrella of helping professions, researchers have only scratched the surface of trauma and secondary trauma’s impact on student affairs professionals, focusing
mainly on issues of burnout and compassion fatigue (Anderson, Guido-DiBrito, & Morrell, 2000, Berwick, 1992, Kicklighter, 1995, Skipper, 1992, Stoves, 2014, Ward, 1995). Given the steady increase in reports of trauma inducing events in contemporary collegiate environments, it is imperative that scholars, practitioners, leaders, and policymakers better understand the impact of secondary traumatic stress on higher education professionals in order to create sustainable work environments that are ultimately set-up to best support college students (ACHA, 2015, Center for Collegiate Mental Health, 2016, Fisher, Cullen, & Turner, 2000, Sanburn, 2015, Silverman & Glick, 2010). Through this study it was my aim to fill this knowledge gap by exploring the lived experiences of U.S. college student affairs professionals who have supported students through traumatic events.

In the following chapter, I have laid out a detailed plan for how this study addressed the following research questions: a) How does secondary traumatic stress manifest in student affairs professionals who work with U.S. college students who have experienced trauma? b) What impact does secondary traumatic stress have on the work of student affairs professionals who work with U.S. college students who have experienced trauma? c) How do student affairs professionals, who work with U.S. college students on U.S. campuses experiencing trauma, make meaning of the trauma their students experience? Chapter 3 will also explore how this study was designed using mixed methods, primarily involving a phenomenological approach underscored by arts-based research methodology. Subsequent chapters will present the results of the phenomenological reduction, a discussion of how the findings answer the stated research questions, and the impact of research findings on the field of higher education.
CHAPTER 3: METHODOLOGY

“We can help a person to be [themselves] by our own willingness to steep ourselves temporarily in [their] world, in [their] private feelings and experiences. By our affirmation of the person as [they are], we give [them] support and strength to take the next step in [their] own growth” (Fischbach, 2016).

In the previous chapters, I explored how trauma and secondary traumatic stress impacts the work of student affairs professionals working at U.S. colleges and universities, as well as highlighted the lack of attention this phenomenon has received in the higher education literature. Secondary trauma was also excised from the greater phenomena of compassion fatigue and burnout, which have both been explored by student affairs practitioners and scholars (Cieslak et al., 2013, Craig & Sprang, 2010, Stoves, 2014). The phenomenon of secondary traumatic stress is central to this study and has been defined as “the stress resulting from helping or wanting to help a traumatized or suffering person” (Figley, 1999, p. 10). The study of this topic is of paramount importance when taking into consideration the proliferation of traumatic events that college students experience in contemporary college environments (Fisher, Cullen, & Turner, 2000, Sanburn, 2015, Silverman & Glick, 2010). While understanding secondary trauma is important for maintaining individuals’ mental and physical health, it is also important to maintaining healthy and efficient organizations, particularly student services divisions that predicate their existence on the ability to support the positive holistic development of college students (Barnes, 2013). This chapter serves as a roadmap for how secondary trauma may be better understood within the contexts of U.S. college student personnel.
The first half of this chapter explores the research paradigm and epistemology that grounds this study, the research questions to be answered, and my role and biases as a researcher who has a vested interest in the impact of secondary trauma on student affairs professionals. This exploration is followed by an extensive description of how these research questions will be answered through a mixed methods approach using a secondary traumatic stress assessment and phenomenological methodologies undergirded by an arts-based research approach to uncover the lived experience of secondary traumatic stress. This chapter concludes with a discussion about the ethical considerations stemming from the necessity of participants being required to recall potentially traumatizing memories, as well as delimiting the scope of the methodologies employed in this study.

**Research Questions**

Given that the design of this study centers on the questions being investigated, it is important to begin this chapter with an understanding of the questions driving this inquiry. In order to better understand the phenomenon of secondary traumatic stress through the lens of student affairs professionals at U.S. colleges and universities, I aim to answer the following questions:

**Question 1.** How does secondary traumatic stress manifest in student affairs professionals who work with U.S. college students who have experienced trauma?

**Question 2.** What impact does working with students who have experienced trauma have on student affairs professionals?

**Question 3.** How do student affairs professionals, who work with college students in the U.S. experiencing trauma, make meaning of the trauma their students experience?
Research Paradigm

Although professional counselors and psychologists have attempted to operationalize trauma as a quantifiable phenomenon for the purpose of diagnosis and treatment, the literature is rife with challenges to this narrowed viewpoint (May & Wisco, 2015, Myhra & Wieling, 2014, Pearlman & Saakvitne, 1995, Shalev, 2002, Sorsoli, 2007, Weathers & Keane, 2007). Many scholars have recognized the pervasive, personal, and individualized nature of trauma, as well as the ripple effects trauma has on the primary victim, those close to the victim, and in some cases entire organizations (McCann & Pearlman, 1990, Newell & MacNeil, 2010, Whitfield & Kanter, 2014). To honor those experiencing trauma in its varied forms, this study grounds itself in the ontological perspective of relativism and epistemological perspective of subjectivism (Parkin, 2013). Taken together, these viewpoints shape the constructivist nature of this study (Merriam, 2009, Cobern, 1993). Constructivist philosophy recognizes the fluid and socially constructed nature of knowledge based on the experiences, interpretations, and contexts of those identifying as architects of knowing, in this case scholars, researchers, and participants, from here labeled co-researchers (Cobern, 1993, Moustakas, 1994).

Additionally, the methodological development and analytical process of this study will be influenced by a critical theorist perspective. Critical theory recognizes that the construction, dissemination, and impact of knowledge is disproportionate based on systems of power and privilege in any given society (Bronner, 2011). In the case of secondary traumatic stress, scholars have recognized the disproportionate impact of this phenomena on individuals who identify as belonging to communities of color and/or the LBGT community (American Psychiatric Association, 2013). This study seeks to bracket the phenomena of secondary traumatic stress, yet
recognize how systems of power influence individual experiences by describing the lived experiences of student affairs professionals from varied backgrounds and experiences.

This section served to situate the reader within the specific research paradigm that best fits the research questions that have been proposed. In the next section, I unpack critical constructivism framed this study through the use of a qualitatively-focused mixed-method design.

**Research Design**

Using constructivism to undergird my research, I employed the use of qualitative research methods to primarily guide this study. Merriam (2009) describes the interest of qualitative research as “understanding how people interpret their experiences, how they construct their worlds, and what meaning they attribute to their experiences” (p. 5). In contrast with quantitative research, qualitative methodologies do not attempt to predict, generalize, or ascribe correlation or causation. Instead, this approach describes and makes meaning of the phenomenon being studied (Merriam, 2009). More specifically, for the purposes of this study I will be using a qualitative methodology known as phenomenology coupled with arts-based research techniques.

**Phenomenology.** Delving deeper into the qualitative research paradigm, I employed a phenomenological approach in the design of this study. The literature reflects a common theme that the definition of phenomenology is not explicit, however, its origins are rooted in philosophy, with the idea first gaining prominence as a methodology at the turn of the twentieth century (Merriam, 2009, Moran, 2000, Moustakas, 1994). However, for the purposes of this study, phenomenology will be described as a methodology that “emphasizes the attempt to get to the truth of matters, to describe phenomena, in the broadest sense as whatever appears in the manner in which it appears” (Moran, 2000, p. 4). More specifically, its purpose can be described
as, “[determining] what an experience means for the persons who have had the experience and are able to provide a comprehensive experience of it” (Moustakas, 1994, p. 13). This philosophy seeks to work from the inside out, first understanding experiences from the perspective of the participant, then building a holistic description around these lived-experiences (Moran, 2000). In order to gain richer and more descriptive experiences from co-researchers, I also used an emergent methodology, detailed in the next section, to undergird this phenomenology: arts based research.

**Arts-based research.** Art has been a central means for communicating human thought, emotions, and experiences for millennia (Rolling, 2013). People travel thousands of miles and pay millions of dollars each year to stand in the presence of the world’s most famous works of art. There is something about visual art that taps into areas of human consciousness that the spoken word simply cannot. The fields of psychology and counseling have increasingly leveraged artistic expression as a means for emotional processing, psychological healing, and communication (Gilroy, 2006, Rosen & Atkins, 2014, Rubin, 2016). Perhaps one of the most famous examples of art being used in the psychological assessment of human experience is the Rorschach Inkblot Test (Tibon-Czopp & Weiner, 2016a, Tibon-Czopp & Weiner, 2016b). This assessment is still used today by professional counselors and psychologists to understand personality and emotional stability (Tibon-Czopp, 2016c). An example of one of the inkblots used in the test may be found in Figure 2 below.
Figure 2. Example of Rorschach Inkblot Test. This figure provides an example of an inkblot test used by famed psychologist Hermann Rorschach in 1921 (Tibon-Czopp, 2016).

Recently, scholars have begun to use art as a means of obtaining and communicating data through the qualitative research paradigm (Andrews, 2009, Denzin, 2000, Finley, 2014, McIntosh, 2010, Rolling, 2013, Wang, 2016). In particular, K-12 scholars have truly pushed the boundaries of this emerging methodology, helping to establish arts-based research as a viable form of knowledge exploration (Barone & Eisner, 2011, Greenwood, 2012, Wang, 2016). Much like other visual methodologies, such as photo elicitation, arts-based research has been associated with a number of useful outcomes in qualitative research design (McNiff, 2007, Rolling, 2013, Shaw, 2013). These outcomes include helping the co-researcher lead the interview, mitigating stress and power dynamics associated with researcher/co-researcher relationships, enhancing trust, leading to longer in-depth interviews, and creating greater engagement during the interview process (Shaw, 2013). Given the deeply personal and multilayered nature of trauma and secondary trauma, it follows that undergirding this study with an art-based research approach
may lend to a more robust and meaningful description of the essence of secondary traumatic stress as experienced by college student affairs professionals.

**Epoche**

In keeping with the phenomenological philosophy described by Moustakas (1994), my interest and experiences with the phenomenon at hand (i.e. secondary traumatic stress) play a crucial role in the development of this research endeavor. Through unpacking my own experiences and interest in secondary traumatic stress, I will be better able to identify and attend to pre-existing biases and understandings of the phenomenon that may act as obstacles in understanding the essence of the phenomenon. This process is known as the *Epoche*, which originates from a Greek term meaning, “to stay away from or abstain” (Moustakas, 1994 p. 85). In this section, I will highlight my own experiences as a higher education professional who has supported students through traumatic events and my understanding of its impact on my professional practice.

I began my career in higher education in 2009, working as a graduate assistant in fraternity and sorority life, then shifting into various resident director roles during and after graduate school, later shifting again to multicultural student affairs. Within each of these roles, I was witness to, and supported students through, various traumatic incidents. The traumas that my students experienced spanned a very large spectrum, including acts of sexual violence and harassment, completed suicides, attempted suicides, severe mental health issues, student deaths, building fires, fear of campus violence, racialized trauma, and war experience. Dealing with these incidents, in aggregate, deeply impacted me in ways I was not aware of until I was able to unpack them through private counseling. I had become withdrawn, irritable, overwhelmed, and jaded. As I began sharing these thoughts with peers and colleagues, I found that I was not the
only one who had these experiences. I also came to find that, like myself, many of my colleagues received little to no training in our graduate programs in regards to holistic mental health care, specifically boundary setting, self-care, and secondary trauma. Even during job-trainings and professional development events, the focus on mental health issues centered around best practices for taking care of students, but little to nothing regarding how to take care of ourselves. Reflecting on my experiences and the widespread nature of supporting students experiencing trauma, I became very interested in how student affairs departments can better support and educate their employees in ways that not only serve students, but also serve professional caregivers.

**Co-Researcher Selection & Recruitment**

In order to explore the multiple and varied experiences of secondary traumatic stress in U.S. higher education professionals, 30 student affairs professionals were selected as co-researchers for this study. Co-researchers were selected using purposeful and criterion-based selection (LeCompte and Preissle, 1993, p. 69, Merriam, 2009). This method requires the creation of a list and logical explanation of criteria that participants, or in this case co-researchers, must meet in order to be included in the study. To that end, co-researchers had to meet one of following criteria for inclusion in this study (Moustakas, 1994, Merriam, 2009):

- Identify as a full-time higher education professional working within a CAS-identified functional area (Wells, 2015), AND must have supported a student through a traumatic life event within the context of their role as a higher education professional.
- Identify as a masters-level graduate student who holds an assistantship within a CAS-identified functional area (Wells, 2015), AND must have supported a student through a traumatic life event within the context of their role as a higher education professional.
Identify as a full-time faculty member whose appointment is within a higher education or student affairs graduate preparation program, AND must have supported a student through a traumatic life event within the context of their role as a higher education professional.

Participants were recruited through their participation in a pilot study, that preceded data collection for this study, where they indicated their willingness to participate in a follow-up qualitative interview. More information regarding the pilot study has been included in Appendix D. Participant recruitment included emails, word of mouth, and professional Facebook groups such as Student Affairs Professionals. A sample recruitment message has been provided in Appendix C.

**Procedures & Data Sources**

**STSAP survey.** Participants were selected from a pool of individuals who took an assessment entitled the Secondary Trauma in Student Affairs Professionals (STSAP) Scale, as part of a pilot study associated with this dissertation. The aim of this selection process was to recruit participants who self-report the highest amounts of secondary trauma as indicated by their response to scale items. However, given that scholars have demonstrated how secondary trauma disproportionately impacts individuals who belong to various marginalized social identities, care was given to take into account the recruitment of diverse participants across racial, sexual orientation, and gender identities (American Psychiatric Association, 2013). In addition, other demographic information was taken into account in order to obtain the most varied perspectives of the phenomenon at hand, including career level, education background, and student affairs function area.
**Visual representation exercise.** Before co-researchers engaged in the interview process regarding their experiences with secondary traumatic stress, they were asked to complete a visual art exercise. As described above, the visual arts have been a useful tool in psychology and counseling for processing emotion, uncovering hidden meaning in human experience, and communicating thoughts in a nonverbal manner (Gilroy, 2006, Rosen & Atkins, 2014, Rubin, 2016). Visual research methodologies are also thought to reduce power dynamics associated with researcher-participant relationships, catalyze discussion, and create more in-depth interviews (Shaw, 2013).

In order to obtain the richest data, co-researchers were asked to spend at least 30 minutes and up to one hour reflecting on times they supported a student or students through a crisis. They were then asked to construct a visual representation of their experience, emotions, and meaning-making process during and after the incident(s). The only restriction given for this assignment was to avoid using photos of other people, with the exception of media outlets such as newspapers and magazines. This restriction was placed in order to potentially protect the anonymity of any students the co-researcher reflected upon. Co-researchers were then left to choose their own medium to produce the visual representation and were asked to email a photocopy of their final product, labeled with their chosen pseudonym, to a university-encrypted electronic storage site known as “Box.” A full description of this project and co-researcher instructions can be found in Appendix A.

**Recorded interviews.** Upon submission of their visual art activity results, I scheduled a one to two-hour interview with co-researchers. The interviews were semi-structured, meaning that while an interview protocol was used to guide discussion, further probing questions and discussion were impromptu depending on the experiences and thoughts shared by co-researchers
(Merriam, 2009). Semi-structured interviews were an appropriate method of gathering data within the phenomenological paradigm as it allowed for the deep investigation of the individual and varied lived experiences of each co-researcher. Additionally, given that co-researchers lived in various areas of the country, I gained consent from each co-researcher to record the meeting using WebEx virtual meeting and recording software. Co-researchers signed up for interview time slots using their chosen pseudonyms via an online scheduling website called “We Join In.”

Each co-researcher interview took place in three parts. The beginning of the interview served to address issues of bracketing the topic of secondary traumatic stress through modified subject-object technique, discussed in the section below. The second stage of the interview centered on a discussion of the visual art activity and the experiences that inspired the results of the project. Finally, the interview concluded with a short debrief of each co-researcher’s experience participating in all three stages of the study: pilot survey participation, visual representation activity, and interview. A full summary of the interview protocol can be found in Appendix B.

*Subject-object interviewing.* The interview protocol for the first part of each co-researcher interview was loosely inspired by the work Lahey et al. (2011), known as *subject-object* interviewing. The goal of this method is to understand the underlying experiences of participants using a set of probing words or questions, as well as the meaning-making process of participants. Within the context of this study, I listed the following words, that may be associated with DSM-V symptomologies of trauma-induced mental illness, for the participants to review: support, mood, trauma, community, distress, irritable, stress, guilt, alienation, avoidance, torn, angry, recurring thoughts. Participants were then given 15 minutes to reflect on the words, and write down 2-3 initial thoughts, emotions, or memories that came up for them within the context
of their support of students experiencing trauma. While protocols for subject-object interviewing were not strictly followed, the aim of this modified protocol was meant to assist in bracketing the interview topic, as well as to put each co-researcher in a thought-space to produce the richest descriptions of their experiences as they relate to secondary traumatic stress.

**Data Analysis**

After the completion of all interviews, recordings were saved as MP3 files and uploaded to the Verbal Ink website for transcription. As a part of phenomenological methodology, the data described in previous sections of this study were analyzed using phenomenological reduction and imaginative variation techniques, as described in Moustakas (1994). Below I outline protocols for each of these analysis techniques as well as how they apply to this specific study.

**Phenomenological Reduction.** The first half of the phenomenological analysis involves setting clear boundaries around the phenomena at hand, in this case secondary traumatic stress, and identifying key aspects of the phenomena that are common throughout co-researcher experiences. Essentially, phenomenological reduction addresses the *what* of the experience. *What* is the experience of secondary traumatic stress in U.S. higher education professionals?

**Bracketing.** This step extends to both data collection and analysis procedures. It involves identifying the problem and ensuring that the context of the interview and data analysis focuses solely on the phenomena at hand, e.g. secondary traumatic stress in U.S. higher education professionals.

**Horizontalization.** Upon becoming familiar with co-researcher transcripts and visual art projects through repeated reading and viewing, approached the first step of the analysis by treating each statement in the interviews with equal weight. At this point in the process, all
information was considered valuable and had the potential to inform a rich description of secondary traumatic stress.

**Delimited horizons.** After repeated readings and viewings of the raw data, certain statements or aspects of the visual art projects lend themselves to a better and more concrete description of the phenomena through the lens of each co-researcher's experience.

**Invariant themes.** Statements identified as central to the phenomenon of secondary traumatic stress were repeatedly read and categorized into emergent themes. One important consideration in this step included purposeful assurance that themes were clearly delineated, meaning that there is no overlap or repetition.

**Individual textural descriptions.** Occurring concurrently with the previous step, invariant themes were identified for each co-researcher, producing multiple textural descriptions. It was at this point in the analysis that co-researchers read their corresponding textural description and provide context, clarity, and revisions regarding emergent themes and the summary of their experience with secondary traumatic stress.

**Composite textural descriptions.** Once the individual textural descriptions had been written and validated by co-researchers, the themes derived from these documents were further categorized into meta-themes, or universal textural descriptions. This step resulted in a robust and descriptive manuscript that contributed to the essence of the phenomenon of secondary traumatic stress in U.S. higher education professionals.

**Imaginative variation.** While phenomenological reduction concerns the what of the experienced phenomenon, imaginative variation attempts to make meaning of how the phenomenon occurred. These steps employed the use of perspective taking and unlimited
possibilities to explore the phenomenon of secondary traumatic stress through multiple and layered lenses.

Variations. During this step I reread the textural descriptions of each co-researcher, and began compiling a list of possible dynamics and environmental aspects of the co-researcher’s experience that lead to the phenomena at hand (i.e. secondary traumatic stress). One key aspect of this step encourages the primary researcher to approach the phenomena from as many perspectives as possible in order to compile a comprehensive list. The items listed are referred to as structural qualities of the phenomenon.

Structural themes. The structural qualities within each co-researcher’s textural description were categorized into themes, again making a purposeful effort to avoid overlapping or repetition between the themes.

Individual structural descriptions. Using the emergent structural themes, I constructed individual manuscripts for each co-researcher, highlighting how they came to experience the phenomena of secondary traumatic stress. They were again given the opportunity to provide clarity and feedback during this step.

Composite textural descriptions. Once the individual structural descriptions were written and validated by co-researchers, the themes derived from these documents were further categorized into meta-themes, or universal structural descriptions. This step resulted in a robust and descriptive manuscript that contributed to understanding the essence of the phenomenon of secondary traumatic stress in U.S. higher education professionals.

Synthesis of composite structural and textural descriptions. Once the composite textural and composite structural descriptions were completed, I then synthesized the two into
one overall descriptive manuscript that attempted to convey the rich and detailed essence of the phenomenon of secondary traumatic stress.

**Trustworthiness**

One critique of qualitative research is the trustworthiness of findings in comparison to traditional empirical quantitative methodologies (Merriam 2009, Moustakas, 1994). However, the aims of qualitative research are different from quantitative research (Merriam, 2009). This study aimed to describe a phenomenon, as opposed to generalizing and quantifying the phenomenon. Although these two approaches serve different purposes, Shenton (2004) highlighted four constructs that “correspond to the criteria employed by the positivist investigator” (p. 64) that may be used to describe the trustworthiness of qualitative investigations. In this section, I used Shenton’s constructs to explore issues of trustworthiness in this study: Credibility, Transferability, Dependability, and Confirmability.

**Credibility.** Credibility may be associated with the concept of internal validity in quantitative research. Shenton (2004) lists a number of criteria that may be used to enhance credibility including: triangulation, using established research methods, iterative questioning, peer scrutiny, researcher reflective commentary, researcher qualifications, member checks, thick description of results, and contextualizing within existing literature.

In order to enhance the credibility of this study, I have addressed each of the items listed above. Most of these items have already been discussed in this chapter. However, to further elaborate, triangulation through the use of multiple sources of data (Creswell, 2007) for this study includes participant interviews, visual art activity materials, and information collected from the secondary trauma assessment. Reflective commentary was also woven into the results section, as I made extensive use of field notes and journaling following each interview in order
to keep a record of thoughts, feelings, epiphanies, connections, and contexts that contextualized each interview (Merriam, 2009).

**Transferability.** Transferability can be associated with the concept of external validity, or generalizability (Shenton, 2004). Within this study, transferability will be bolstered by the use of rich, thick description within the manuscripts (Creswell 2007, Merriam 2009). In using heavily descriptive writing, readers may be better able to contextualize results and transfer them to their own environments. I have also attempted to provide as much individual context for each participant within the next chapter so that readers may have a holistic view of each participant’s experience of secondary traumatic stress.

**Dependability.** Dependability may be associated with the concept reliability in quantitative research (Shenton, 2004). To address this, I attempted to be as detailed as possible in how this study was conducted. Additionally, I not only used a well-accepted methodology within the qualitative paradigm, *phenomenology*, I also sought to extend and bolster the methodology with the use of art-based research techniques that allowed for a deeper understanding of participant experiences.

**Confirmability.** Finally, confirmability can be associated with the idea of objectivity (Shenton, 2004). However, it should be noted that the idea of objectivity could be perceived to be at odds with the constructivist perspective of this study. Nevertheless, confirmability has been addressed in this study to mitigate researcher bias through the use of triangulation, detailed methodological explanations, and an explicit statement of known biases that I may have possessed going into this study.

This construct was addressed through employing the assistance of co-researchers to confirm accurate theme clusters and textural descriptions. Co-researchers were given this
opportunity once individual textural descriptions were written for each co-researcher interview. Additionally, I enlisted the assistance of a certified counselor to provide secondary coding of all co-researcher visual representation final products.

**Ethical Considerations**

The nature of this study raised concerns regarding the psychological care and safety of co-researchers. Being asked not only to recall their work with students experiencing trauma, but to concentrate specifically on these memories for extended periods of time had the potential to cause psychological discomfort or distress. To mitigate this, care was taken to ensure that co-researchers understood what would be asked of them before their participation, as well as offering post-participation resources. Before participation in this study, co-researchers were given a list of services that include counseling resources, spiritual resources, and self-care resources that they may take advantage of should their participation in this study have proved to resurface latent traumatic stress or instigate new traumatic stress.

**Methodological Limitations**

The methodology was not without its limitations. Although it featured a healthy sample size for qualitative inquiry, it still does not lend itself to generalization to all U.S. student affairs professionals. The nature of phenomenological studies is also more concerned with describing a particular phenomenon rather than quantifying, operationalizing, or investigating causality of the phenomena. However, to understand the varied and multilayered nature of secondary traumatic stress, practitioners and scholars can greatly benefit from understanding the in-depth lived experiences of individuals who may have experienced this phenomenon.

Furthermore, co-researchers in this study did not disclose if they had been diagnosed with any particular mental illness by a licensed mental health professional. Additionally, the traumas
described in their narratives may not meet the DSM-V criteria for trauma-induced mental illness. Co-researchers were also assumed to have represented their experiences truthfully in both their responses to the STSAP survey and the interview questions. Finally, given the subjective nature of qualitative methodology, researcher bias must also be assumed to impact the interpretation of co-researcher narratives.

Chapter Summary

This chapter served as a roadmap for understanding the methodology for how this study attempted to answer the proposed research questions regarding the phenomenon of secondary traumatic stress in student affairs professionals working in U.S. higher education. Due to the personal and varied nature of trauma and secondary trauma and its disproportionate impact on individuals, this study was grounded in a constructivist ontological-interpretivist epistemology, understanding that knowledge, truth, and the human experience is subjective and developed based on contexts and personal experiences (Parkin, 2014). In order to understand the nature of secondary traumatic stress in U.S. college student affairs, I chose to employ a mixed methods approach, screening co-researchers using a secondary traumatic stress assessment. Upon their selection, co-researchers were asked to complete a brief visual art activity meant to help them process and explore the meaning of their experiences regarding their support of college students who have experienced trauma. The results of this activity acted as a communication aid during semi-structured interviews with co-researchers. Results of the visual art activity and interviews were then analyzed using phenomenological reduction and imaginative variation techniques to create textural and structural descriptions of secondary traumatic stress in U.S. higher education professionals (Moustakas, 1994).
In the chapters that follow the results of this study are summarized. Chapter 4 serves to explores central themes regarding the what and how of secondary traumatic stress as manifested in U.S. student affairs professions. Finally, Chapter 5 will be used to discuss how the research findings served to answer the research questions presented in this chapter, their practical and theoretical implications for higher education, and the limitations that bound this study.
CHAPTER 4: PRESENTATION OF RESULTS

“...the other thing about this whole secondary trauma thing, is that you don't talk about it.” (Krista, Co-Researcher)

Previous chapters of this dissertation explored the nature of psychological trauma and the impact of working with traumatized individuals on professional helpers. This impact, coined secondary traumatic stress, has been described as “the natural, consequent behaviors and emotions resulting from knowledge about a traumatizing event experienced by a significant other...the stress resulting from helping or wanting to help a traumatized or suffering person” (Figley, 1999). Scholars in nursing, K-12 education, and social work have sought to explore this phenomenon within their respective fields, however, to date, there has been little empirical investigation of secondary trauma in the field of college student affairs, despite evidence of significantly increased levels of trauma support expected of these professionals (Bride, Robinson, Yegidis, & Figley, 2004, Galek, Flannelly, & Greene, 2011, Hydon, 2015, Lynch & Glass, 2017, Whitfield & Kanter, 2014). This study aimed to address this gap in the higher education literature by exploring the lived experiences of student affairs professionals who have supported students through trauma. Specifically, this study made use of a phenomenological methodology undergirded by art-based research techniques to explore the essence of secondary traumatic stress as it applies to student affairs work.

In this chapter, the results of this investigation are revealed though a rich description of participant experiences as they apply to emergent themes relevant to the following research questions: How does secondary traumatic stress manifest in student affairs professionals who
work with U.S. college students who have experienced trauma? What impact does working with students who have experienced trauma have on student affairs professionals? How do student affairs professionals, who work with college students in the U.S. experiencing trauma, make meaning of the trauma their students experience?

Summary of Data Analysis

In Chapter 3, I provided an in-depth description of methods used to collect data for this phenomenological exploration of secondary traumatic stress in student affairs professionals. The results of the data collection produced a rich set of data including self-ratings for an assessment measuring symptoms of secondary trauma, 30 interviews, each averaging at least one hour, descriptive field notes providing context and setting for each interview, and 28 visual representations of student crisis support. Below, I have summarized the steps taken in order to perform the data analysis using a modified form of the Van Kaam (1966) method of analysis of phenomenological data as outlined in Moustakas (1994). In addition, a secondary analysis was performed by a colleague who has graduate credentials in counseling.

Step 1. Listing and preliminary grouping. In preparation for this step, I printed out each co-researcher interview, visual representation, and interview field notes. From there, I began using the process of horizontalization, where, after reading each co-researcher’s transcripts and viewing each visual representation, I highlighted every expression or observation that may be relevant to the phenomenon of secondary trauma as experienced by student affairs professionals.

Step 2. Phenomenological reduction and elimination. Taking the records highlighted in Step 1, I began to identify and record invariant horizons in a codebook using Microsoft Excel.
Moustakas (1994) describes invariant horizons as “…the unique qualities of an experience, those that stand out” (p. 128).

**Step 3. Clustering and thematizing.** Upon identifying all invariant horizons from each co-researcher, I began to identify patterns within co-researcher experiences. Those invariant horizons that indicated a central theme were then clustered together.

**Step 4. Final identification of themes by application.** Themes were confirmed by rereading the co-researcher interview as a whole, matching each theme against the narrative to confirm that the theme could be found throughout the narrative.

**Step 5. Creation of textural descriptions.** Using emergent themes within the co-researcher interviews, a brief summary of the co-researchers’ experience of secondary trauma was conceptualized.

**Step 6. Creation of structural descriptions through imaginative variation.** Again, using emergent themes, as well as the textural description, for each co-researcher, a brief structural description was conceptualized in order to identify how secondary trauma may manifest within student affairs professionals.

**Step 7. Meta-themes and synthesis of composite structural and textural descriptions.** The final step in the process was to collapse individual co-researcher themes into overarching meta-themes. With the assistance of a colleague with credentials in counseling, we each read over the full list of themes from all 30 participants, and identified common themes that emerged from the reading. We then presented our findings with each other, finally settling on seven overarching meta-themes that could be found throughout most, if not all, co-researcher experiences. Using these meta-themes, steps five and six were repeated in order to describe the essence of secondary trauma, as well as how it manifests in student affairs work.
In the sections below, I have outlined pertinent information regarding the sample of co-researchers that are important to contextualizing findings. I then present the synthesis described above organized by theme, as well as how findings relate to the researcher questions guiding this study. It is important to note that the audio for two co-researcher interviews, Karl and Wiggum, were corrupted and unable to be transcribed. Field notes from the interviews, as well as their completed visual representation projects, were used in the analysis. Additionally, two participants, Beth and Krista, did not submit their visual representation, instead they verbally described their work during their interview.

**Co-Researcher Characteristics**

In order to appropriately contextualize the findings of this study, it is important to understand the background and experiences of the co-researchers themselves. In total, there were 30 co-researchers, all representing diverse backgrounds and experiences. The majority of participants identified as either white, cis-gendered female, and/or straight. Most co-researchers also identified as either a new professional, or mid-level professional, with a master’s degree in either higher education, college student personnel, or similar discipline. Finally, most participants stated that they currently work at a public institution, either in the Northeast or Southern regions of the U.S., and also work in either residential life or campus activities. It is important to note that currently no dataset exists to compare this sample to the national demographics of the field of college student affairs. A complete summary of participant demographics may be found below in Table 4. A summary of individual co-researcher profiles may be found in Appendix E.
Table 4

Co-Researcher Demographics

<table>
<thead>
<tr>
<th>Demographic Category</th>
<th>N</th>
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<tr>
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<tr>
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<td>Career Services</td>
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<tr>
<td>Graduate &amp; Professional Student Services</td>
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In the next section, I summarize the textural and structural descriptions of secondary traumatic stress as experienced by each of the co-researchers, followed by a description of themes that emerged across all co-researcher experiences, from here on referred to as meta-themes, as well as how the results connect to the stated research questions.

**Thematic Synthesis**

Below, in Table 5, I have listed seven meta-themes that emerged from co-researcher interviews. Using direct quotes from co-researchers, I have described each of the themes in relation to how student affairs professionals may experience secondary traumatic stress, or stress occurring from their support of students in crisis. Additionally, each theme is illustrated using one of the visual representations created by one of the co-researchers. Supplementary supporting quotes for each theme may be found in Appendix J, and a complete list of co-researcher visual representations may be found in Appendix I. A quantitative tally of participant horizons supporting each theme may be found in Appendix K.

**Table 5**

<table>
<thead>
<tr>
<th>Theme</th>
<th>Brief Description</th>
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<tr>
<td>Theme 1: The cumulative nature of trauma support in higher education</td>
<td>Theme 1 speaks to the experience of many co-researchers who described how their support of college students experiencing trauma was not limited to occasional isolated occurrences. Instead, they describe their support as repetitive, and in some cases almost constant.</td>
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<tr>
<td>Theme 2: Inadequate professional preparation, resources, and guidance</td>
<td>Theme 2 summarizes co-researcher stories of feeling underprepared to serve students experiencing trauma, particularly as it relates</td>
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to graduate preparation programs and job on-
boarding.

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<tr>
<th>Theme 3: Professional’s self-efficacy as an effective support-person</th>
<th>Theme 3 illustrates beliefs that co-researchers held in regard to their ability to support students through trauma, as well as their ability to process their support in healthy ways.</th>
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<tr>
<th>Theme 4: Impact of professional and organizational culture on the development of maladaptive views of student support</th>
<th>Theme 4 describes how the profession of college student affairs, or individual organizations, perpetuates maladaptive coping mechanisms when student affairs manage student trauma support.</th>
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<tr>
<th>Theme 5: Importance of personal and professional support networks</th>
<th>Theme 5 highlights co-researcher experiences that indicate how they experienced, or did not experience, support both personally and professionally, and how this support bolstered their ability to manage their support of students.</th>
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<tr>
<th>Theme 6: Personal impact of professional’s relationship with student(s) in crisis</th>
<th>Theme 6 demonstrates how co-researcher relationships with students experiencing trauma exacerbated or mitigated their experience of secondary traumatic stress.</th>
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</table>

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<tr>
<th>Theme 7: The negative impact of support-work on personal wellness</th>
<th>Theme 7 illustrates how supporting students through trauma may manifest in physical and psychological symptoms for the co-researchers.</th>
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**Theme 1: Cumulative nature of trauma support in higher education.** One of the most striking themes to emerge from co-researcher narratives was the cumulative nature of trauma support within their positions as college student affairs professionals. Below Rene, a new professional in her first year in international student services, acutely illustrates this concept in
her visual representation. Her representation incorporates direct quotes from students she has supported and conveys the global, and seemingly never ending, nature of trauma support in her role. One of the most striking quotes from her piece included a PhD student from Turkey. He pleaded “My father was imprisoned after the coup in Turkey. The government is ordering me to return home immediately and to stop my PhD. My wife and two children must return with me. Please [help], I am scared.”

![Image of Rene's visual representation]

**Figure 3.** Rene’s visual representation of secondary traumatic stress. Chosen to represent Theme 1, her visualization uses pencil and plain typing paper to depict the seemingly never ending nature of student trauma support.

Anecdotes about the stress of balancing stated job duties with emergent student trauma support were common. During her interview, Rene described the experience of balancing her role as professional helper with a myriad of other responsibilities with which she was tasked.

…it just keeps coming. It's a constant deluge. It's never – it will never end, and there's no such thing as a non-busy period for us. I have a list of projects and things that I'm supposed to be doing that I don't even have time to do, and I'm worried that I'm going to
be half-assing a lot of it because there's just not time, and I refuse to do this stuff on weekends. I didn't used to be like that, but now that I'm working this full-time job, I am hording my personal time because I would probably go insane if I tried to do extra work outside of my job for the job.

Rene continued to explain her feelings of helplessness and ethical conflict, as her supervisors told her that she was not to help students. She was only to assist them with their paperwork needs and refer them to other resources for anything else. However, Rene found this extremely difficult as student after student came to her with such intense traumas that they were experiencing. This, juxtaposed with tasks that have little relation to direct support, left Rene questioning her purpose and future as a student affairs professional.

Although Rene describes how stated and unstated job responsibilities often accumulate, Krista, a former residential life professional and current career services professional, commented on the experience of directly supporting multiple students in trauma within a small timeframe.

It’s crazy…one of the years that I was [a Resident Director], in the course of a month, there were two suicide completions and another three hospitalizations for attempts, when I was on call. It was insane…What are the staff supposed to do when they're coming just one after the other after the other after the other?

This experience was not isolated for Krista, as she went on to retell experiences of student suicide completions even in her current job in career services. Krista was devastated by these events, and felt that she had few reliable resources to assist her. She was given almost no time to process and recover from the impact these events had on her. Turning to substance abuse, she eventually recognized the internalized trauma she was experiencing and was able to seek professional help on her own, although she still struggles with these incidents of trauma support.
Both Rene and Krista worked at institutions where students were mostly white, but Beth, a new residential life professional works at a historically black university in the southern U.S. Her stories often illustrated the impact of institutional contexts on the cumulative nature of trauma support.

I think when I was working in a [predominantly white institution], we talked about trauma but it wasn’t an everyday occurrence. Here [at a historically black university] I have students who have experienced and become so desensitized to trauma that they don’t even realize that it’s trauma. The amount of trauma and the severity of the trauma is so extensive that if I didn’t take care of myself I would go home, crawl in a ball, and never come out. And I don’t know how these students are walking around the halls getting the grades they’re getting and going on with their lives when just hearing about it makes me shake.

Not only does Beth work at an institution that primarily serves racially minoritized students, she also works very closely with trans-identified students at the university, adding another level of complexity to the support she attempts to provide. It is also important to note that Beth has had a long-time personal connection to the trans-community. As she reflected on her visual representation project, Beth stated:

And as you know, [trans-students] are at higher risk for sexual assault. So, it’s mostly thinking about family issues, it was thinking about sexual assault, I was thinking about multiple layers of sexual assault within the family…So, having to come to work every day knowing that today may be another day where I hear another story of an assault or another parent kicking a student out of their house or another student struggling with
depression and anxiety caused by issues with their parents or the death of the student, or suicidal ideation because of a history with sexual assault, it’s hard.

Rene, Krista, and Beth highlight primarily negative aspects of the cumulative impacts of trauma support, but this was not the case for all co-researchers. For some, growth opportunities were revealed in their stories. Bernadette, a mid-level professional working at a women’s center and LGBT services, describes developing resilience through supporting multiple students through trauma.

I would say for me, a lot of the things I don’t feel – I don’t fluctuate all that much, and I think the more I do this work the less I fluctuate. I think I’m at over 100 sexual assaults being reported to me, so at a certain point you get to a point where you hear the story and it doesn’t really affect you. The first couple times you’re crying, you’re out for a couple weeks, and then at a certain point you just calm down. And you can hear a story, you can hear it over and over and over again and it doesn’t really affect you. You might need a hug from a coworker and then you go onto the next one. It doesn’t affect you like the first one. I think for me it’s a different – it just is. I don’t know. I think that’s part of doing this work. I think my armor keeps getting stronger, which both worries me and doesn’t. I think that’s what you do.

While not the norm in their reflections, some co-researchers were able to identify how their support of students led to their development of “emotional armor.” Frequently described as numbing, desensitization, or dissociation, it would be a mistake to completely describe this aspect of trauma support as positive, however, it does identify the nuanced complexity of the phenomenon, and how professionals develop the capacity to shield themselves.
A popular children’s book, *The Giving Tree*, tells the story of a child and a tree, where the tree continually gives of itself to the child until there is nothing left. Analogously, Chloe, a mid-level health promotion services professional, poignantly summarized this theme, “I feel like with every case that I have or with every student that I provide support, I'm giving them a little bit of my heart, I'm giving them a little bit of myself.”

**Theme 2: Inadequate professional preparation, resources, and guidance.** Although many student affairs professionals frequently find themselves in situations where they are supporting students through a traumatic life event, co-researchers revealed that they did not feel adequately prepared, or were not being equipped by their departments, to support students in these situations. Below, Veronica, a senior level administrator in graduate student services, used her visual representation to highlight changes she has noticed in her job over the years. Her representation centered on her original job description, and how it has evolved from administrative and skill development services to frequent and sustained support of students experiencing a myriad of traumatic life events.
Figure 4. Veronica’s visual representation of secondary traumatic stress. Printed from her original job description, she used digital collage to describe how student needs have evolved beyond what she originally signed up or and what she was prepared for.

From graduate preparation programs to on-going professional development opportunities, co-researchers felt they were often relying on their own experiences of trial and error when supporting students experiencing trauma. Primarily, co-researchers spoke to their graduate preparation programs, but many co-researchers also commented on lack of intentional skill development within their departments, despite being required to exercise specific skillsets. Luke, a new professional working in campus activity programs, reflected on the role of his graduate education in his ability to support students:

I don't feel that the student affairs master's program fully prepares you…I was an RA for three years at my undergrad and I'll be real with you, I relied more on that experience than anything I learned in my master's program. There has to be something where the student affairs field at large needs to recognize that it's not enough just to throw fresh grads into those types of positions. There needs to be either something more formal or it needs to be clearly stated that the master's degree is purely for the theoretical [aspects of the job] and advanced stages of your career in student affairs…you don't get taught how to respond to emergencies in your master's program, but yet 90 percent of entry-level jobs [require this skill] …yet none of our programs really focus on that.

Another senior administrator, Ramon, frequently observed how new professionals react to, or handle the personal impact of, supporting students through traumatic events. He stated:

One of the conversations my boss and I have had is: Are there less people willing to do this work? Because we're not as connected to grad prep programs, we're wondering: Are
we talking about this in Master's level grad prep programs? How are we preparing students to come out of those programs and thrive in these jobs? It is not just the Dean of Students job. There are a lot of jobs where you are potentially facing that concept of secondary trauma.

Frequently, co-researchers would comment about what they, or those training them, expected when it came to student support, however, that expectation did not meet reality. Practically speaking, student support can be complicated and nuanced, and without intentional skill development, professionals often rely on experiences outside of their formal training. Again, Beth commented:

I have my bachelor’s in psych, so I have some kind of semblance of what counseling looks like and I’ve worked with teenagers who have mental health and behavioral issues. But my graduate career did not prepare for me in the slightest to sit down and work through issues like this with students. My graduate degree said “You’re gonna have these issues, tell them to go to the counseling center.” And that’s not how the real world works so it’s just what am I supposed to do? How am I supposed to calm a suicidal student down? Because, yeah, I can call the counseling center or the counselor on call all I want, that’s not gonna give me the tools in the moment when they’re freaking out to do anything. Because the counselor’s not always gonna be there.

Beyond graduate preparation, co-researchers also reflected on the lack of training and preparation they received within the departments in which they worked. They also spoke to structural issues within their departments that left them at a disadvantage. Chloe, a mid-level professional working in a newly formed sexual violence services department, spoke to this issue.
They didn't tell me what their expectations were when I first came here, and so I kind of just – when I first came here, I was the only advocate. I didn't want just to be on call 24/7, 365 days of the year. I needed to put boundaries on that. So I started getting more advocates, I got a specific phone number, and so people didn't have to use their own personal phones. That was a boundary for me. Even though work provides me my phone, I wanted a separate line, and the separate line, for one, are for our boundaries, and for two, to make sure that students have a direct access to get an advocate, instead of going through res life or going through public safety.

Reilley effectively summarized how co-researchers expressed dissatisfaction with their training and skill development received from departments requiring them to act as professional helpers to students experiencing trauma.

There’s some team-leadership issues, there were some divisional-leadership issues, and I don't think there was a lot of robust professional development that would actually really help me be a supporter to someone else. Getting six hours of “Here's how to have hard conversations with people in a time of need” is not a training program for support.

**Theme 3: Professional’s self-efficacy as an effective support-person.** Another common theme among co-researcher experiences was their perception of their ability to support students through trauma, as well as their perception of how they manage the personal impact of trauma support. In the visual representation below, Margaret uses Adobe Photoshop to convey her sense of emotion around trauma support, but she also goes on to detail how it represents her desire to dissociate from her emotions or avoid processing the impact of her work on her emotional well-being.
Figure 5. Margaret’s visual representation of secondary traumatic stress. Using Adobe Photoshop, she sought to convey the feeling of dissociation or avoidance of dealing with thoughts and feelings associated with supporting students through trauma.

One way in which this theme manifested in co-researcher experiences was through a persistent internal questioning of their own skillset or ability to support students effectively. Xavier, a new professional in health promotion services, reflects on occasions where students confide in him about their suicidal ideations:

In those moments, I don’t know how to really support [the student] fully. And there are some days where I'm like, I don't know what else I can do. I don’t want—like, if you have this plan to kill yourself, I don't know what I can do other than just tell you “don’t,” and be alive, and you have a lot to do.

Clarissa, a mid-level professional working in campus activities, goes even further in describing this sense of self-doubt as she served in an on-call crisis support role. She noted that this was not an aspect of the position she expected to have to fulfill given her functional area.

Support I think stands out because I do feel like if I am with others a lot of what I wrote down was about if I’m responding to something more as an individual I worry more. I get
stressed out, and I would like to avoid that. So because I feel like I might miss something, I’ll forget or I won’t know the right thing to say… I often think ‘oh my gosh, what if I forgot something, what if I missed a step, what if I say the wrong thing and there is no one there to correct me and to jump in’… I have so much worry and self-doubt about how I would handle things on my own, because I don’t want to screw up, I don’t want a student to not feel supported, or to further traumatize them because I said the wrong thing or I missed a step.

This notion was especially significant as co-researchers described their first time supporting a student through trauma. They often described this experience as intense, anxiety-producing, and unnerving. Elizabeth, a mid-level professional working in student conduct, reflected on one of her first times managing a sexual-assault incident:

One of my first times [managing a sexual assault case]– it was a case in which there was penetration and we had some sanctioning guidelines which said if there's penetration and they're found responsible that it's expulsion. And so accordingly the student was expelled. And I went home and I just laid in my bed and I'm like, "Who the hell am I?" And it wasn't that feeling of guilt because, again, it was him. It was his action, his behavior that had got him there. And I know it wasn't me. I know it was the university. But it was a very weird like, "Who the hell am I to make this decision?"

Although self-efficacy manifested in co-researcher narratives as a doubt in their ability to effectively support students, it was also expressed in their ability to manage their own emotions and thoughts regarding the students’ trauma. Matt, a senior level administrator working in a leadership and civic engagement department, described his internal struggle with how he was impacted by student trauma:
What I've learned about myself is I don't have a really good perspective on where these boundaries are for me being emotionally available, compassionate, empathetic, and allowing myself to take on too much responsibility or too much contagion from this trauma, and that's really those little bits, different colored bits all over the place. So I don't know. I don't know if it's good when I'm hearing a student tell me their life story, and they're doing it in a dispassionate way, to tear up and a tear run down my cheek. I don't know if that's appropriate or inappropriate. I don't know how much time is an appropriate amount of time to help a student solve their own problem. I don't know how much of my family to neglect and my marriage to neglect, or other aspects of my job to neglect to help the student navigate their trauma. So I've learned that I don't have a good bearing on that. And I think it was also a reminder that these really dynamics that – you can't dial them in and fix them. There's not just a technical fix to them. They have a very real cost, a very real cost, and I don’t know what to do with that I guess.

As with the cumulative impact of trauma support in Theme 1, some co-researchers reported an increase in self-efficacy as they gained more experience. Below, Clarissa reflects on her current view of her abilities to support students through trauma.

But I get it now. At the time, I [thought] what are they thinking? I am not ready. But I was. And I’m good at it and I didn’t think I would be. And I think part of that was because of my worries around things like good question asking, being able to think strategically. I didn’t think that I was good at that and I realized I just hadn’t had to do it before. It wasn’t that I was bad, I just didn’t have to think strategically. I wasn’t responsible for two professional staff members and a grad assistant and the direction of a department and that sort of thing. I think trauma stuff aside, that part did help me just to
be a better professional as far as how I approached things and I do think that that has also helped with some of this trauma management as well.

Additionally, some co-researchers seemed to have had a very pragmatic view of trauma support from the start of their careers. Coleman, a new professional in residential life, did not view himself as the student’s primary source of support. Instead, he viewed himself as an intermediary that temporarily supported the student until they could be cared for by an expert. This often allowed him to separate his experience from the student’s experience.

Basically anything that is not someone’s head cracked open with blood coming out…I could handle stuff that’s not somebody physically bleeding in front of me. I feel like it’s because people are people, crappy stuff is going to happen, and if there’s gonna be somebody addressing it, it may as well be me because I can help work through the tasks and all the pieces, and I’m not the expert there to treat them, I’m the expert there to call the right people.

**Theme 4: Impact of professional and organizational culture on the development of maladaptive views of student support.** Common among most, if not all, co-researcher narratives was the view of organizational and professional cultures as an impetus for maladaptive views of student support. Angie, a mid-level professional working in civic engagement and service learning, uses simple markers and shapes to express the sadness that her work can bring, but also the love and support she expects to give to each student.
Figure 6. Angie’s visual representation of secondary traumatic stress. Using plain printing paper and marker, she conveys the duality of the experience of being a student affairs professional: loving and centering students in spite of the hardships and sadness that accompanies the work.

As with many of the co-researchers, Angie also displayed an innate avoidance or neglect of personal processing after supporting students through various traumas. This tendency was expressed in many co-researchers, and often attributed to the professional notion that students always come first, leaving professionals to constantly put off their own time to process and heal. Below, she reflected on her participation in this study and the impact it had on her.

I don’t take a lot of time to stop and reflect…I personally don’t see it as beneficial. Often I think that when you stop to reflect and you spend so much [reflecting] [it] can lead you back to feeling like that and not being able to function really well in your life, so I don’t
take time often to sit back and reflect. I think it was very interesting to do that because that’s just not characteristically my personality.

On the other hand, Luke, a new professional in campus activities, expressed how external norms and expectations within his university conflicted with his own expectations of student support, as well as how these norms had a negative impact on him.

The one thing that I noticed in dealing with those traumatic incidences was I didn't like how much I worried about what the administration was going to do after I handled the situation. That entered into the pattern of feelings that I would feel. I didn't realize how there was something wrong there for me until – I would say until about a year before I left...there seems to be this culture of protecting the university before protecting the students from a very broad perspective.

Krista brings another view of institutional and departmental cultures, as she critiques her past experiences within organizations that seemingly value support but only to the extent it applies to students. Extending from her narrative from Theme 1, she never had a chance to intentionally process the multiple student suicides she experienced. Krista explained:

[At my current institution], we are so good at supporting our students and getting our students connected [to resources], but there was never a time for the staff to talk about it. And even, as RDs at [my old institution], there was never a time for the staff to talk about it, unless we went out for drinks on our own time or went out for coffee or something like that. But there was never a time where we would sit down and actually discuss it and actually really sit there and let people feel, which is such bullshit for a profession that's supposed to be supporting. But who are we supporting? I guess we're supporting the students, right? Okay, yeah, supporting the students at the cost of the staff.
Transitioning from her role as a graduate assistant in a non-residential life department to her role as a new residential life professional, Beth compares and contrasts how differences in institutional cultures can be jarring and a catalyst for maladaptive views of student support.

I think when I was working at [my graduate institution], professionalism was very different than I’d define it here. I think it depends on the administration and the expectations that are set up from the get-go. I think at [my old institution] professionalism was shoved down your throat and there was that clear line that you do not cross for anything. It was one of the most important things when you walked through that door that you were a professional, you had no ties to the outside world. It was almost like it was taking your humanity away as a professional because all that mattered was policy and procedure and if a student told you something you were just a mandated reporter. I don’t know, it was like you had to leave your compassion and your character at the door when you walked through the halls. But I feel like here these kids are my family, so it’s a lot different. It’s not like I can separate professional and personal as much here because I live with the students. They’re my children, and I know as a professional you’re taught don’t call them your kids, don’t call them kids, don’t call them your students, they’re just students. That’s not what it’s like here, and if you are not calling them your kids, if you’re not calling them your students, they get offended, they get upset. So, really it changes. It’s different from institution to institution.

Many co-researchers also reflected on the culture of the college student affairs profession as a whole. A commonality in these reflections was a hidden norm that student affairs professionals do not talk about negative thoughts or emotions they may have as a result of supporting students. While completing her visual representation, Margaret used the project as a
platform to discuss the topic of secondary trauma with colleagues. She recalled the conversations:

My coworkers here and some folks from other places were like, "Yeah, we agree," or like when I talked to them about dealing with trauma and how to really process through it and stuff. I feel like whenever I brought it up to people, people were really receptive because this is their experience too. I feel like it's this thing that people don't talk about in the field. They don't talk about what it feels like...It's kind of just like this unspoken thing that you're supposed to just do your job and do it well every day and there is no room for feeling any kind of feelings whether it's frustration or anger. There is no actual time to take care of yourself or spaces really for processing. So, it was good to be able to talk to other folks about it, especially folks that ‘get it’ because it's not an uncommon feeling.

Jose, a graduate student in a student affairs preparation program, also reflected on his experience of the field during his interview debrief:

[This interview] was almost therapeutic in a way to be honest. I feel like in this field there’s not much discussion on the effects of constantly being on-call for a professional, whether that’s res life or any other student affairs department. So, we’re expected to be unconditionally supportive to our students, which is a very noble thing, but we’re not reflective on how that hurts us every now and then, and then how to deal with that. So being able to actually tell someone about that was actually a very therapeutic experience and I thank you for it.

Leslie, a senior-student affairs officer had a different take on the culture of the profession. As a seasoned professional, she interpreted the negative impact of support work on individual tendencies to go above-and-beyond the call to duty. She explained:
They also tend to— you know, this is a profession where [professionals] tend to wear themselves out and be martyrs. So, it's just saying it's okay if there aren't six of you in the support center today since we have two students here. You could take time away. So that sort of thing.

While most co-researcher narratives that spoke to this theme centered on negative experiences, some highlighted how organizational cultures can act as a barrier to secondary traumatic stress. Below, Elizabeth talks about departmental norms that her supervisor actively enforces:

So this is where I'm really lucky…this is my first job where if I didn't have the people I was working with I probably would have quit this field a long time ago. My boss is great… For the most part, I don't have a lot of weekend or evening obligations. There are the occasional things: trainings, or we work football games and stuff. But…he does a good job of keeping it like 8:00 to 5:00. There's the, "Oh, I'm going to stay until 6:00 and finish this up." That happens. But a lot of times at the end of the day he'll come around and he'll say, "All right. 5:30. Ship's leaving. Let's go." And so we'll all kind of leave together…And I think wellness is really promoted. A lot of people will work out on their lunch breaks. I was doing that for a little while. And then, of course, again, that ebbs and flows. But people are not encouraged to do that…actually you're even encouraged if you work out during lunch it's okay to take a little bit of extra time. So take an hour and a half, take two hours. I think it's really more so like, "Well, as long as you're getting the work done, do what you need to do and manage yourself how you need to."

**Theme 5: Importance of personal and professional support networks.** Perhaps the most consistent theme between co-researcher experiences was the concept of support. This
theme emerged in a variety of ways, whether through commentary of the co-researcher’s support of students, or through conversations regarding their experience of support by loved-ones, colleagues, or supervisors. In Figure 7, Elizabeth uses colored pencils and markers to illustrate a variety of support mechanisms she experienced as she reflected on times she supported students through trauma in her role as a professional in sexual violence-related programs & services.

![Figure 7](image)

*Figure 7. Elizabeth’s visual representation of secondary traumatic stress. Using marker, colored pencil, and sketch paper, she depicts balance and support she receives as she supports students experiencing trauma.*

Although support came up in every co-researcher narrative, it was divided among three types of support: peer support, supervisory support, and support from loved-ones. Below, Jane, a graduate assistant in residence life, explained her system for seeking support from peers and colleagues:

> I’m organized about who I can talk to about things, given the institution that I work at. I feel like when I think about students that I’ve supported in crises, that's strongly usually
like – I usually go to other RDs, by far, first. I think about those identities first before I go to my folks who are not RDs—“who are my mental health folks? or my queer folks? or my API folks? or my people of color folks?”

Jane continued to detail why she chose specific folks to confide in when she needed support:

I just felt like that sometimes the only people I'll go to, to process in the moment, because they can get it, and they can understand what I'm going through, and know why I'm not giving all the details. I think that's another piece. I can't talk to my mom about it, about a lot of this stuff… I'd rather talk to people who can either find out for themselves, because they get sneaky and start looking at reports… or looking at duty logs, or they just know. They're like, "Yeah, I know you can't tell me. That's fine. What's coming up for you though?"

During Clarissa’s interview, she used a metaphor of trauma as rocks that professionals carry and share with each other. She astutely used the metaphor to describe how she views professionals’ ability to deal with trauma in the field.

I think sometimes we’re both carrying the same rock, I don’t know if we always pass it. I think sometimes we carry it together so the weight isn’t as much. So I think that that helps. Especially when you’re in it, right? In the moment. I also think that a lot of it ends up being us with each other so again, just because – so my husband is a lieutenant in the fire department as I mentioned earlier. And I think it’s a similar concept except way more intense and not a job I could do – because they are life and death every day. They just have an understand of what their world is and how they can talk about it and gallows humor and all that kind of stuff. And I think that while it’s a different way of doing that within our field, I do think that we have an understanding of what it means to work in this
field, whether you are in one functional area or the other, we’re all here for our students.

So I do think a lot of the support does come from each other…it’s us carrying the same rock.

Other co-researchers spoke of support when it came to their, primarily negative, experience of their supervisors. Sophia, a former residence life professional who has since left the field of student affairs, revealed her experience of her direct supervisor:

I felt like there was no actual support from supervisors, and I think that's what always made me kind of just feel on edge, was they had this expectation that I told them the types of things I would tell my therapist. But yet they're administrators. They're not adequately trained in this field. And it's also super inappropriate to expect an employee to divulge – or at least I felt it was inappropriate for an employee to divulge that kind of information to supervisors. Some people had supervisors that would weaponize that kind of information against them. That's just not right.

Sophia went on to describe other negative experiences of her supervisor when she experienced sexual harassment from a member of the departmental leadership team. The individual in question made statements to her about losing her job if she continued to talk about the personal impact her work was having on her. She stated that she, “never felt comfortable with discussing the sexual harassment with the AD who supervised me for two reasons: 1) my harassers threats and 2) my supervisor’s expectation that I ‘manage my emotions’ and maintain a happy exterior.”

Below, Scarlett, a mid-level professional in campus activities, recalls her own experience with a supervisor, and her thoughts about supervisory culture in student affairs, after a student experienced a severe mental health episode

I think a lot of [secondary trauma] comes from supervision. I don't think that my supervisor had any clue how to (1) deal with me, and (2) deal with the [students
experiencing trauma]. I think he actually made the person's psychosis worse, and he made it about him instead of the person... Plus – this is my tangent and soapbox. Why are there so many bad supervisors in higher ed? I do not understand. Everyone I talk to hates their supervisor or has had a terrible supervisor. But, we are supposed to be preparing people. I don't get it. So, I think that there is a lot of work that needs to be done in our field about supervision because it makes or breaks our experiences. I think it is why we have so much attrition in the field. Anyway, that's my soapbox.

Finally, co-researchers often found solace from their work in the support of their loved-ones. Whether parents, spouses, partners, or just friends, it seemed that having someone they loved and trusted to listen to them temporarily alleviated their stress. Clarissa summarizes how many co-researchers described support from love-ones:

My poor husband. Any time, it doesn’t matter if it’s a cute greeting card or I get a little upset about something, he’s very patient with my tears. I cry, cry, cry – not usually at work, sometimes at work, but usually I wait until I get home. And then I feel like after that most of the time I am able to then figure out, okay, how do I like support people? How do I lift people up? How can I be an ally, how do I be an advocate?

**Theme 6: Personal impact of professional’s relationship with student(s) in crisis.**

Theme 6 dealt with the relationship between the co-researcher and the student(s) they supported through trauma. Through my conversations with the co-researchers, as well as viewing their visual representations, much of their emotional distress came from personally knowing the student experiencing trauma, or feeling guilt from not knowing the student well enough. Luke’s visual representation in Figure 8 uses Adobe Photoshop to depict his view of himself as a defense or barrier between the student and the trauma-inducing event.
Figure 8. Luke’s visual representation of secondary traumatic stress. Using Adobe Photoshop, he depicts how he envisions himself as a barrier or defense for students experiencing trauma.

A key aspect of student affairs work is the relationships that are built with individual students. Co-researchers all reflected on their affection for their students, and the joy they derive from those connections. However, for some co-researchers, the stronger this connection, the more stress they experienced when that student experienced trauma. Additionally, some professionals also found that past personal traumas may deepen their emotional reaction to students experiencing a similar trauma. Scott, a current doctoral student and former campus activities professional, shared the nature of his relationship with former students:

We could be here all night talking about instances [of students oversharing], but just they’ll be talking about what went on over the weekend. And are these things you really want to be sharing with me? This is Scott ‘the advisor.’ A lot of times they’d be like, “Scott, can you take your advisor hat off? I just want Scott the friend right now.” So
orchestrating conversations that way. A lot of times they’re sharing too much information.

While Scott describes students’ tendencies to overshare information, Chloe speaks to building relationships with students by sharing pieces of her own life:

And so with each person, especially in these past few years in my role here, I've come to know [students] a lot, and I feel that they have gotten to know me too, 'cause I don't want to be somebody they don't know, so they have somebody they can support. So there's little bits and pieces of me that I give to them, so that they know who they're coming to for support. You know, whether it's they know that I have cats, or they know where I went to school, or what I like to do for fun, or how many brothers that I have. Giving them a piece of that is I think helpful in that process, and also for me supporting them.

However, sometimes developing close relationships came at a cost. When reflecting on why some students do not seek support from campus mental health professionals, Beth shared:

I think the students expect, especially the RDs, to know what they’re doing. They come to us first because they trust us, they come to us because they know us. And in my experience when I’ve brought up the counseling center, they’re like, “Well, I don’t know them. I don’t trust them. I trust you. Can’t you help me?” And it’s like, “No, I can’t. I can’t do what you need me to do.” I can’t do what they need me to do and still go home and be a human being. So, it’s just rough in a place like this.

Building on the connection between professionals and students, Therese, a current faculty member in a student affairs master’s program and former women’s center administrator, shared her experience guiding students through reflections regarding personal traumas such as sexual assault. As a survivor of sexual violence, she explained:
I found it very overwhelming, really overwhelming – more overwhelming than the student who comes into your office and says, "I have something I need to talk to you about. Something really bad happened," because it came out of nowhere. To me, I was creating this really awesome internship program. It was going to be fun. Yes, it was rooted in some of my trauma and then my service, but I didn't think theirs was going to be. When I realized that it was that much more of a shared community, a shared experience, I was I think very overwhelmed.

Opposite of many co-researchers, Ramon, a Dean of Students, spoke of the negative impact of not knowing a student, but having to quickly get to know a student after a serious trauma. Leslie, a senior student affairs officer, found emotional distress in not being particularly close to the student who experienced trauma. She shared:

I think the guilt piece for me almost always is – in my role, I often don't know the student or students who died or the – you know, so you feel guilty because people are like, "Oh, did you know the student–" you're on the news and you're supposed to talk personally about the students, but I didn't know them.

**Theme 7: The negative impact of support-work on personal wellness.** The last meta-theme that emerged from the data concerned how co-researchers described the impact of support work on their personal wellbeing both physically and psychologically. Below, Jane, a graduate assistant in residential life, used watercolor markers to create a self-portrait of her experience when serving in a crisis on-call rotation. She stated that she hoped to convey the sleeplessness, unease, and exposure support-work causes her.
Figure 9. Jane’s visual representation of secondary traumatic stress. Using water color paper and water color pencils, she depicts the impact of trauma support work through representations of sleeplessness, raw exposure, and constant unease.

For the co-researchers, one of the primary impacts of student support work was changes in their ability to think clearly or how they perceived themselves and others. These changes included decreasing abilities to concentrate, normalization of trauma, unreasonable expectations of themselves to support students, hypervigilance, and hypercriticism of peers and colleagues. Margaret reveals the impact of her work as a support person for sexual assault survivors on her ability to focus on her work, as well as her desire to avoid processing her thoughts and feelings:

Sometimes I feel like it's hard to get work done or it's hard to focus on anything else. The reason I put the eyes on the hands is because sometimes I feel like I just want to get over it. Like my feelings about something. So particularly I've had a couple – like one sexual
assault incident and one domestic violence where the person in this situation the student said, "Oh, this is happened to me before." And particularly thinking about those and I just don't – I just don't even want to think about it. It just makes me feel like so deeply horrified and sad. So I think sometimes I want to just not see things going on and I don't want to think about it and I don't want it to affect my work, but it's also my job.

Occasionally changes in thoughts and perceptions were severe and jarring. Bernadette, a professional in gender and sexuality programs and services, speaks to the experience of becoming hypervigilant to the possibility of experiencing sexual violence because of repeated exposure to sexual assault survivors.

It sometimes scares me because… sexual assault is normal to me… I assume anyone could sexually assault someone. It’s an assumption that this world, I think to a certain extent, anyone could be a [perpetrator]. And I think that’s really something I learned in student affairs, and…it just shatters your worldview a little bit. But I think it’s easier when you think anyone could be than if you think no one could be. I don’t know.

Trauma support work also appeared to have a strong emotional impact on many co-researchers. Strong emotions such as guilt, anger, and distress were frequently mentioned during interviews, as well as depicted in visual representations. These emotions were caused by and directed at a wide spectrum of circumstances. Whether guilt that they could not do more or anger at their colleagues or institution for not supporting students in ways they perceived effective, co-researchers often seem to intentionally process these emotions for the first time during their interviews with me. Rene, a new professional in international student services, discusses the complexities of her anger and distress as it applies to her sphere of influence within her job:
I feel angry at myself when I get something wrong. Any time I feel anger, I direct it internally, so I never have been a person that directs anger externally to a person. I won't shout. I won't yell. I won't throw things. I just – I won't even journal to get things out. I just turn things furiously into myself, and berate myself, and hate myself, and it all goes internal, so that is also bad when you're in a stressful job. Yeah, I feel angry if I get something wrong, or if I can't tell a student – well, a lot of the time, I can't tell a student what they want to hear, but if I can't help a student, I get very frustrated and angry.

Luke expands on the concept of anger and irritability as he depicted the impact support-work had on his personal relationships.

I would definitely say the irritability piece, that irritability word, really stuck out to me. That brought a lot of feelings in the way of I think [about] personal relationships because with my personal relationships and my personal life, it's a lot of how I dealt with [my emotions]. They spilled out into those relationships and people. I'm normally a very positive person. I like telling jokes and I would get more easily irritated after an incident. I remember people just using that word, "You're so irritable. What's going on? This isn't you." I remember coming home and it was late and my wife, she's amazing. I mean, she went out. She knows I love donuts so she got coffee and donuts for me at our favorite place and just like, "Hey, here it is. If you want to talk about it we don't have to. If you just – if you want to talk about it to death, that's okay." I remember wanting to talk about it in the moment and then as soon as I started bringing up some of the details, I just – I took this turn every time she asked me a question. She was really trying to help me process it. I was snappy. I was snippy. I was impatient with her and it just turned so fast and she said, "You're really irritating me right now." In that moment I was like, "Hey, I
thought you are doing this for me. To help me out." And in that moment, I was like "wow.” Like what's happening with me? This isn't me.

Although anger and irritability were common emotions expressed by the co-researchers, the feeling of guilt was widespread as well. Many co-researchers spoke of their support of students as if they were the only ones that could help a particular student appropriately, or if they said something imperfectly they would further harm the student. Bonnie recalled a time early in her career in residential living where her guilt stemmed from comparing herself to her peers and how this guilt spiraled into more severe feelings of depression:

I think feeling guilty for not being able to help students and not being able to manage things the way that my peers did. So I would say that my coworkers have been in residence life for a while so it was really hard for me to manage the on-call rotation. And I volunteered to help out as much as possible, but I felt guilty that I wasn't doing it as well as they were and not dealing with it as well as they were. So I think I felt like I was almost like in a daze and clouded by like these feelings of depression that I was feeling empathy for my students and since I had been there before. And I just felt like I wasn't doing as good of a job as I could. But I never felt like anyone told me that, but I just felt like I wasn't always present and wasn't really coming to work the best that I could on a day-to-day basis.

Almost all co-researchers spoke to negative emotions related to their support of students experiencing trauma, however, many also spoke to dissociating their emotions or completely ignoring the strong emotions they were experiencing. Monica, a new professional in sexual violence-related programs and services, spoke to this experience as she repeatedly supported
students in her area during her first job. She also exemplified another area in which the co-researchers identified negative personal outcomes: physical changes.

“So for me it was that I turned off my emotion. I was there. I did my cases. I was there for those students. I just couldn’t care anymore. I had to turn it off. The weirdest thing actually is that I’ve only been in my new position since April. I have literally gotten healthier. My job was making me physically sick. I was on medication for high blood pressure. I had an old shoulder injury, and I had surgery, and I was in constant pain. I was getting therapeutic massage like once every week. We’re not talking go relax”

One of the most succinct descriptions of physical changes experienced by co-researchers came from Sophia, a former residential life professional as she described the months after she left the field:

The biggest thing was leaving housing. My weight stabilized. I stopped having migraines. I stopped having acne breakouts. It was like all these physical changes manifested themselves within the first six months of me leaving. So physically I feel better, and when that happens, stress levels go down.

This section gave voice to each co-researchers’ experience of supporting students through traumatic events, and the individual impact it had on them personally and professionally.

Reflecting on the seven themes that emerged from the data, I summarize potential answers to the research questions posed at the beginning of this study.

**Connection to Research Questions**

This dissertation sought to understand the essence of secondary traumatic stress as experienced by U.S. college student affairs professionals supporting students through a trauma. In order to systematically bracket this phenomenon, three research questions were developed.
Based on the emergent meta-themes described in the section above, as well as other structural and invariant themes from co-researcher interviews, I lay out potential answers to the research questions below. In Chapter 5 I discuss how findings support, extend, or contradict established understandings of secondary trauma in student affairs and other helping professions, as well as specific implications for professionals, departmental leaders, policy makers, and scholars.

**Question One.** How does secondary traumatic stress manifest in student affairs professionals who work with U.S. college students who have experienced trauma?

Data collected from co-researchers pointed to four factors that seem to contribute to the stress experienced by professionals who have supported students through trauma. These factors included: lack of intentional preparation in graduate programs and/or departmental trainings, the cumulative impact of the number of traumas professionals support students through, relationship with supervisors, and opportunities to process and reflect on trauma support. Given the frequency and magnitude of traumas experienced by today’s college student, coupled with expectations of support with or without a well-developed skillset, student affairs professionals may potentially experience serious negative outcomes such as secondary trauma. Adding issues with poor supervision and professional cultures that stifle, or under-prioritize, personal and professional reflection, only increases that risk.

**Question Two.** What impact does working with students who have experienced trauma have on student affairs professionals?

Through careful and repeated analysis of co-researcher interviews, interview field notes, and visual representations, several commonalities emerged as to how these professionals experience stress related to their work supporting students through trauma. These impacts include emotional distress in the form of anger, guilt, or sadness, or even experiences as severe
as anxiety and depression. Co-researchers also experienced physical impacts such as insomnia, poor eating habits, and high blood pressure. Finally, other negative outcomes included unreasonable expectations of themselves and/or peers, as well as decreased self-efficacy as it related to their confidence in being an effective helper and being able to cope with bearing witness to student trauma.

It is important to note, that while phenomenological methods require the researcher to view the phenomenon under study with a ‘blank slate’ mentality, I would be remiss to point out that many of the outcomes the co-researchers expressed fell within the criteria described in the DSM-V for stress-related mental health disorders. While only a mental health professional can diagnose an individual after intensive investigation, it is clear that trauma support in student affairs is not without personal risk.

**Question Three.** How do student affairs professionals, who work with college students in the U.S. experiencing trauma, make meaning of the trauma their students experience?

Interestingly, many co-researchers commented that participation in this study was the first time they intentionally reflected on their experiences supporting students through trauma. Those that fell into this category seemed to have a difficult time making meaning of those experiences. Conversely, those that have had practiced some form of reflection in the past seemed to experience a level of post-traumatic growth, or the positive transformations an individual may undergo following a traumatic event. These professionals site increased confidence in themselves to support students or handle the stressors associated with trauma support. They also recognize their own limitations, actively set boundaries within their jobs, and consistently seek opportunities to learning about, and engage in, rejuvenating activities.
Finally, whether they experienced growth or not, co-researchers all sought meaning in the process of supporting students through traumatic life events. They stated they recognized that there is a purpose and need for their work, and feel compelled to continue serving students.

**Chapter Summary**

In this chapter, I discussed the results of the phenomenological analysis of secondary traumatic stress in U.S. student affairs professionals. The experience of co-researcher’s support of students through trauma was discussed. While commonalities emerged within each co-researcher’s narrative, several themes emerged across their experiences. These themes included: the cumulative nature of trauma support in higher education, inadequate professional preparation, resources, and guidance, professional’s self-efficacy as an effective support-person, impact of professional and organizational culture on the development of maladaptive views of student support, importance of personal and professional support networks, personal impact of professional’s relationship with student(s) in crisis, the negative impact of support-work on personal wellness. Using the analytical techniques of Van Manen (1990) and Moustakas (1994), I distilled co-researcher experiences into the essence of secondary traumatic stress as experienced by student affairs professionals. This process allowed me to address the research questions that guided this study. Overall, the co-researchers in this study experienced stress related to supporting students through trauma in a variety of ways, including emotional detachment, depression, anxiety, anger, avoidance, unrealistic expectations of themselves or others, and avoiding intentional processing of their experience. Co-researcher narratives also indicated that their experience of secondary traumatic stress may manifest due to their caseloads, lack of supervisory and/or peer support, professional cultures, and lack of intentional skill development.
“For too long, the field of student affairs has paid lip service to the notion of self-care. We talk about it, complain that we do not have enough of it, but do very little to truly change the status quo, or promote healthy lifestyles within our own organizations or institutions. Even today, while our student affairs associations sponsor knowledge communities and task forces of almost every kind, it is only in the last several years that they have begun to explore and try to unravel the mystery of supporting and genuinely promoting the health and well-being of not just students, but the professionals who serve them” (Miller, 2016, p. 141).

Since the development of the seminal document *The Student Personnel Point of View*, 1937, U.S. college student affairs personnel have been charged with supporting the holistic development of college students, including providing support and guidance through traumatic life-events (American Council on Education Studies, 1937). As student cultures evolve and diversify, the types, magnitude, and frequency of student traumas has dramatically increased, yet, investment in adequate professional mental health services has not kept pace. This situation has left many student affairs professionals managing student trauma or, at least, acting as first-responders to student trauma, often without adequate training or support. While higher education scholars have taken interest in the college mental health crisis, few researchers have stopped to investigate the psychological impact of trauma support on the professionals managing this phenomenon. Research in professional helping fields, such as social work and counseling, has
pointed out that repeated exposure to trauma victims, or details of their stories, can lead to a phenomenon known as secondary traumatic stress, or “the stress resulting from helping or wanting to help a traumatized or suffering person” (Figley, 1999, p. 10). Symptoms of this phenomenon (avoidance, intrusive thoughts, changes in mood or cognition, and change in arousal and reactivity) are described under the criteria for post-traumatic stress disorder in the DSM-V (American Psychiatric Association, 2013).

To date, higher education researchers have begun to investigate related outcomes of student support on college student personnel such as compassion fatigue and burnout, however, this study sought to extend the literature stemming from social work and counseling by investigating the phenomenon of secondary traumatic stress in U.S. student affairs professionals. Through the use of phenomenological methodologies, as described in Moustakas (1994), this study began to uncover the essence of secondary trauma within college student affairs, citing six meta-themes that emerged from 30 interviews with co-researchers identifying as student affairs professionals who have supported students through trauma. These themes included: the cumulative nature of trauma support in higher education; inadequate professional preparation, resources, and guidance; professional’s self-efficacy as an effective support-person; impact of professional and organizational culture on the development of maladaptive views of student support; importance of personal and professional support networks; personal impact of professional’s relationship with student(s) in crisis; the negative impact of support-work on personal wellness.

In this chapter, I explore how the results presented in Chapter 4 are of significance to the field of college student affairs, how results extend current understanding of the phenomenon of secondary trauma, and shortcomings of this particular study. I also explore how practitioners and
scholars in U.S. higher education may apply results to their own practice or extend this line of research. Finally, I end this chapter with concluding statements regarding this project.

**Relevance and Significance of Results**

Personal wellness and student support are skills that have been canonized as a part of core competencies within the field of college student affairs. The 2016 joint ACPA/NASPA Professional Competencies document lists personal wellness 14 times (ACPA & NASPA, 2015). Although talked about in nebulous terms, such as self-care, little has been done to understand the toll support work takes on those whose graduate and professional preparation leave them ill-equipped to manage student trauma (Miller, 2016, Spano, 2011). This study, inspired by these competencies, investigated the impact of student support on the personal wellness of individual student affairs professionals through the lens of secondary trauma. Scholars and practitioners in both student affairs and other helping professions recognize that professional helpers are only as effective in their jobs as they are able to manage their own emotional and psychological capacities (Cieslak et al., 2014, Thompson et al., 2014). Yet, the college student personnel who are often acting as first-responders to students experiencing trauma have received less professional training regarding counseling and helping skills than they did twenty years ago (Spano, 2011).

Avoiding the negative personal outcomes of professional support-work is problematic in many ways. From an ethical and employee-centered lens, professionals who are underprepared to appropriately manage student trauma risk serious personal harm. From an organizational lens, institutions may be losing a large amount of financial resources that could be applied elsewhere. Robsham (2016) reported,
The Center for Prevention and Health Services estimates that mental illness (and substance abuse) cost employers roughly $79 to $105 billion in indirect costs. Things like increased healthcare costs, absenteeism, and decreased productivity are just a few of the ways institutions and organizations pay for poor mental health.

Those experiencing secondary traumatic stress, or other stress-related health outcomes, are at risk of the very maladies outlined by The Center for Prevention and Health Services (American Psychiatric Association, 2013, Bride et al. 2004). Finally, student affairs professionals who are experiencing negative outcomes from support-work may be less capable of providing the support expected of them in the first place, potentially having a negative impact on students.

This study is significant as it vividly illustrates the lived, and often mixed, experiences and impact of student affairs professionals who have supported students through crisis. By naming the problem, and analyzing it from a holistic perspective, we, as a profession, may begin to address the issue of secondary traumatic stress. From the perspective of a former residential life professional, I found myself deeply connecting with co-researcher narratives and finding a sense of personal healing, but also frustration, in knowing that I was not alone in experiencing the physical and psychological impacts they described. The culture of U.S. college student affairs dictates that students are to come first, with the professional’s wellbeing coming second; but even then, it seems that the professional’s wellbeing is only important to the extent it allows the individual to continue their student support work. My aim in investigating the phenomenon of secondary traumatic stress through my pilot study and dissertation research was to amplify the voices of the many professionals who constantly give pieces of themselves in service to the students with which they work, and demonstrate the pervasive and overlooked nature of
secondary trauma. It is my hope that the results of this investigation are used to inform professional preparation practices and begin to change the culture of the profession to value the wellbeing of those who care so deeply for the students at our colleges and universities.

**Contextualization Within Existing Literature**

In Chapter 2, I discussed the literature relevant to the experience of professional helpers, the phenomenon of secondary traumatic stress, and the juxtaposition of college student affairs practitioners as professional helpers. The chapter concluded with commentary on gaps in understanding regarding the impact of supporting college students through various psychologically traumatizing events. Specifically, scholars and those charged with preparing leaders within the field of student affairs have only begun to investigate outcomes of this work on professionals, primarily focusing on concepts such as burnout and compassion fatigue (Barnes, 2013, Figley, 2002, Galek et al., 2011, Newell & MacNeil, 2011). While these outcomes are of vital importance to maintaining wellness and professional capacities, they have not explicitly explored the impact of sustained trauma support may have on these professionals. In this section, I briefly revisit literature outlined in Chapter 2, and how this study extends, contradicts, or supports existing understanding of secondary traumatic stress.

Primarily, this study aimed to understand the essence of secondary traumatic stress through the lens of college student personnel who have supported students through a psychological trauma. Few studies have addressed this topic within the higher education literature, and those that did have either conflated secondary trauma with burnout and compassion fatigue, or have had very limited participant samples (Forney et al., 1982, Kicklighter, 1998, Stoves, 2004). The present study extends understanding of secondary trauma in higher education through exploring experiences of a well-rounded sample of professionals in a
wide variety of functional areas, institution types, career levels, and education levels. It also underscores the traumas that students still experience as outlined by Silverman & Glick (2010), with emphasis on mental health issues, suicidality, and sexual violence. Overall, this study illustrates a snapshot of the work being required of U.S. student affairs professionals and the impact of that work.

Beyond the field of higher education, this study also undergirds existing literature within social work and counseling. Inspired by Bride et al. (2004), this study extended their work through use of updated criteria within the DSM-V and use of qualitative methods to understand the lived experiences of those who may be dealing with secondary trauma. Many co-researchers also exemplified four key criteria regarding stress-related mental health issues: avoidance of thoughts or triggers that remind them of student trauma, changes in arousal and reactivity manifested through hypervigilance, persistent exaggerated expectations about oneself or others, and intrusive thoughts regarding memories of the student experiencing trauma (American Psychiatric Association, 2013). Furthermore, findings supported the work of several empirical investigations noting that caseload volumes, frequency of interaction with trauma victims, personal trauma history, presence of social networks, self-efficacy, and empathy were all important factors in the development, or prevention, of negative stress reactions (Anderson et al., 2013, Cieslak et al. 2013, Crumpei & Dafinoiu, 2012, & Hensel et al., 2015). Finally, within the K-12 literature, this study expanded the work of Hyndon et al. (2015), finding that student affairs professionals sampled in this project experienced many of the same symptoms as the sample of teachers: fatigue, emotional detachment, behavioral changes, diminished concentration, interpersonal withdrawal, and existential questioning.
Although this study sets a foundation for greater understanding of secondary traumatic stress in college student affairs, there is still much to be uncovered about this phenomenon. In the next section, I highlight how the results of this study may be used for practical applications, as well as how this study may inform future investigations regarding the topic of secondary trauma in higher education.

**Implications for Research and Practice**

A number of theoretical and practical implications may be gleaned from the results of co-researcher narratives, however, the co-researchers themselves offered a number of suggestions for how this study may be used to extend professional practice and scholarly understanding of the impact of student affairs work on professionals. Below, I have detailed specific practical implications resulting from this study, as well as how future scholarship may address gaps and limitations of this study or extend the understanding of this topic.

**Practical implications.** Using the themes identified from co-researcher experiences, as well as recommendations from individual co-researchers, several practical applications of this study are outlined below. Recommendations have been categorized under three headers: department and university leadership, graduate and professional preparation, and considerations for the profession.

**Department and university leaders.** From a department and university management level, this study illustrates the need for strong, compassionate, and skilled supervisors for those serving in student support roles. Institutional leaders should invest in developing supervisory capacities, ensuring that when a supervisor is hired, or an employee is promoted to a supervisory role, they undergo intentional trainings in the form of workshops or continuing education so that
they may provide appropriate boundaries and support for employees who find themselves working as trauma stewards.

From a human resources perspective, those serving in supervisory roles should also undergo regular, formal, and anonymous evaluation by those under their leadership so that areas of strengths and improvement may be identified and strengthened. In 2015, the American Psychological Association Center for Organizational Excellence reported 51 percent of employers view mental health as the biggest threat to staff health (Scott, 2015). Given this report, human resource officers should also ensure that they have a current understanding of their state’s workers’ compensation policies concerning work-related stress. Although the connection between mental illness and occupation continues to be litigated, there is precedence for employee compensation due to work induced, or exacerbated, mental health issues cases (Berry, 1998, Copeley, n.d., Riley, 2000). Currently, most states provide workers’ compensation for issues related to mental health, even though individual states may have varying criteria that must be met (Copeley, n.d.). Additionally, human resource policy makers may consider mandatory paid leave, mandatory flex-time, or adjustment of job descriptions for employees who may find themselves intentionally, or unintentionally, acting in a trauma support capacity.

Finally, supervisors and organizational managers must provide employees who serve in student support roles with intentional and routine opportunities to process their experiences both professionally and personally. This may include investing in a non-university affiliated mental health professional to lead monthly, quarterly, or semesterly support groups, or developing policies requiring professionals to attend a set number of counseling sessions depending on the frequency and/or magnitude of their trauma support. Best practices in both counseling and social work also take caseload into consideration for employee wellness and effectiveness (Hensel,
Supervisors and organizational leaders may consider placing limits on caseloads for those who work in areas requiring frequent trauma support such as student conduct, residential living, or health promotion.

**Graduate and professional preparation.** Graduate and professional preparation programs are often a gateway for careers in U.S. college student affairs, and therefore may serve as the first exposure that professionals may receive in regards to helping skills and trauma support. Unfortunately, given changes in CACREP accreditation, programs have strayed from their roots in counseling (Cutler, 2002, Protivnak, Paylo, & Mercer, 2014). This study, and the corresponding pilot study, illustrated how lack of intentional preparation can lead to negative outcomes for professionals in college student affairs, as well as the prevalence and magnitude of student-trauma in U.S. higher education (Lynch & Glass, 2017). In this vein, faculty and masters-level graduate program coordinators should heavily consider how their curricula align with the demands put upon professionals at all career levels in regard to trauma support. I strongly encourage those shaping curriculum and educational agendas for programs across the country to view student affairs preparation through the lens of social work, perhaps even considering modeling curricula after social work programs, or partnering with existing social work programs. At the very least, faculty may consider requiring at least two semesters of counseling-based coursework in master’s programs.

Additionally, the structure of practitioner-based assistantships should be more comprehensive. Many programs offer, or require, students to be employed within a graduate assistantship, however, they leave the structure, expected outcomes, and intentional reflections up to departmental employers. Program coordinators should become more involved in setting expectations of graduate employers, requiring mandatory structured reflection opportunities, as
Coordinators may also incorporate curricular support of assistantships by creating required monthly, quarterly, or semesterly group debriefings where students are challenged to reflect on their experiences, articulate how they are applying helping skills, and reveal skill-areas in which they lack confidence. Given the demands of full-time faculty work, coordination of such opportunities could be facilitated by adjunct faculty opportunities.

**Considerations for the profession.** Results of this study may have significant implications for practice at the university-level, however, leaders in the profession, specifically those serving as leaders in national professional organizations, can find use in this study by setting a national agenda for student affairs practitioners in regards to trauma stewardship. For example, as professional competencies and standards are revisited in the future, personal wellness may be more explicitly identified as a competency, as opposed to being included as a sub-section for competencies such as Personal Foundations & Ethics (ACPA & NASPA, 2015).

Furthermore, national organizations may consider creating structured opportunities for skill development in the area of trauma support and personal wellness beyond one to two hour sessions at conferences. These opportunities may include conference curricula, with multiple intentional opportunities for growth, institutes and retreats aimed at uncovering the ripple effect and nature of student trauma, and continuing education requirements or certifications for professionals in functional areas with higher volumes of trauma support caseloads.

**Theoretical implications.** In addition to the practical applications of this study, results may also be used as a basis for further empirical investigation. Recommendations have been grouped in three categories: expansion of current study, extending understanding, and interdisciplinary perspectives.
**Expansion of current study.** Although the co-researchers in this study came from diverse backgrounds and experiences, the pool was also quite homogenous in many ways. Future research replicating the methodology of this study is warranted using more specific populations. The DSM-V indicated that those identifying as racial, sexual, or gender minorities may be at greater risk of developing stress-induced mental illness. Given that the present study’s sample was primarily white, cis-gender, and heterosexual, a gap still exists in understanding population-specific experiences of secondary trauma.

Other replication studies may center on organizational specific populations. Barnes (2013) proposed the concept of organizational trauma, illustrating the far-reaching nature of psychological trauma. It would be useful to understand the essence of secondary trauma and how it develops within other populations that serve to support students in higher education, namely resident assistants, peer mentors, and faculty. Scholars may also consider understanding secondary trauma from a departmental or divisional perspective, using methodologies outlined in this study to understand collective experiences of organizations.

Finally, while faculty members were represented in this investigation, the perspectives of practitioners were heavily centered. Given the proximity of faculty to students, as well as their role in developing future student affairs practitioners, it would be prudent to better understand the experiences of faculty members who have supported students through traumatic events.

**Extending understanding.** This study sought to understand the essence of secondary traumatic stress as it exists within college student affairs professionals. However, it only provided a snapshot of the holistic experience of a group of professionals. Further exploration is warranted for a more nuanced understanding of this phenomenon. Recommendations for such
scholarship may include longitudinal studies that may uncover patterns, peaks, and lulls in regard to how secondary trauma may manifest.

An important line of future research could potentially involve quasi-experimental methods comparing various interventions that may mitigate the impact of secondary trauma. For example, a common theme in this study was the importance of processing, therefore, a study comparing support group participation to individualized reflective exercises could provide further insight into this theme. Other studies of interest may include investigating how past personal trauma may leave student affairs professionals at risk for development secondary traumatic stress, or studies exploring how the work of student affairs professions experiencing secondary trauma may be impacted.

**Interdisciplinary perspectives.** Future research on the topic of secondary traumatic stress in U.S. student affairs professionals should consider an interdisciplinary approach. The present study was partly grounded in literature from the fields of counseling and social work. Yet, other disciplines may offer perspectives that would deepen understanding of this phenomenon and serve to better support professionals dealing with secondary trauma. For example, while not rising to the level of a theme, some participants cited the role of spirituality as a means of self-care and a buffer against secondary trauma. Stemming from this finding, studies intersecting the topic of trauma and spirituality or processes of meaning making are warranted. Another common theme worth exploring is the importance of organizational and supervisory support for employees serving as trauma stewards. Using organizational theory and supervisory literature, researchers may choose to investigate which supervisory styles lead to the best outcomes for student affairs professionals, and students. One example could include the use of *The Situational Leadership Model* as a framework for qualitative investigations of supervisors of student affairs
professionals serving as trauma stewards (Hersey & Blanchard, 1988). This framework takes into consideration the amount of guidance and direction from leaders, the amount of support a leader provides, and the readiness of followers to achieve an objective.

**Limitations**

This study was grounded in a traditional phenomenological methodology, undergirded by an emerging methodology known as art based research (Barone & Elliot, 2011, Moustakas, 1994). Great care was taken in designing the semi-structured interview protocol and visual representation activity in order to produce the richest and most nuanced co-researcher narratives as possible. Additionally, participants were recruited in order to provide varied and diverse accounts of their experience supporting students through trauma. However, as with all studies, there are limitations that should be taken into account when interpreting and contextualizing the findings of this study.

One philosophical critique of the phenomenological method, and arts based research, is the subjectivity of human experience and interpretation (Shi, 2011). Originators of the method describe phenomenology as “a rigorous and unbiased study that investigates a phenomenon to achieve an essential understanding of human consciousness and experience” (Husserl, 1982, Shi, 2011, p. 11). Interestingly, this seems to contradict the constructivist epistemology from which the method emerged. Through constructivism, this study recognizes the inherent subjectivity of qualitative research, understanding that knowledge of the human experience may only be achieved through investigating multiple perspectives, and even then a complete illustration may not be achievable. Qualitative researchers, particularly those using phenomenological approaches, try to account for their own bias in reflecting on, and stating, their own past experiences, assumptions, and current knowledge of the phenomenon at hand (Merriam, 2009,
Moustakas, 1994, Shi, 2011). Through this process, the researcher may be able to achieve an objective and unbiased perspective of the phenomenon. Yet, many researchers, such as Van Manen (1990) and Aijawi and Higgs (2007), point out that true objectivity cannot be achieved. While I have attempted to bracket my own experiences and pre-knowledge regarding secondary traumatic stress, this study should be interpreted critically, taking into account the perspectives and experiences I shared.

Additionally, the purpose of qualitative research is meant to describe a phenomenon, case, or event in depth and holistically. This fundamentally limits qualitative studies from generalizability to larger populations. In the case of this study, co-researcher narratives are useful in understanding experiences in real-world settings, however, further quantitative studies may be warranted to truly understand the widespread impact of secondary trauma in the field. Co-researcher narratives were also somewhat homogenous in regard to racial, gender, and sexual-orientation diversity. Once more, although I have attempted to provide a rich illustration of co-researcher experiences, as well as my own interpretations of meaning derived from those experiences, I am neither a credentialed psychologist nor a certified counselor. My interpretations are not meant to suggest diagnosis but to give voice to common experiences shared within and between co-researchers.

In regard to issues involving individual co-researchers, none were asked to reveal any clinical mental health diagnosis. Also, due to the sensitive and subjective nature of this study, participants may have not fully expressed their experiences or may not have remembered their experiences with strict accuracy. It is important to note that some original participants chose to drop out of the study as they felt that remembering past student trauma would be too painful.
Finally, some design issues should be taken into account include the limits of technology used to record interviews. WebEx and QuickTime software were used to facilitate and record co-researcher interviews, however, due to various issues, some co-researcher interviews were recorded using a hand-held recording device and the speaker capability of my iPhone. Two interviews were done in person. Two interviews were also lost due to lack of audio quality. Technology may also play a role in the comfort of co-researchers in sharing their experiences, with some perhaps finding the video-interview format safer while others may have found it a barrier to sharing openly. Lastly, most interviews took place during the late fall and early spring semesters. This may have impacted the stories that were shared by co-researchers since they had not completed the academic year, and many may have had down-time to rest over their institution’s winter break.

Conclusion

Traumatic stress is not new within U.S. higher education, yet in recent decades, the frequency and magnitude of students reporting a trauma experience has greatly increased (Locke & Stauffer, 2015, Suicide Prevention Resource Center, 2014). Reports from the Center for Collegiate Mental Health (2015) indicate that the demand for on-campus counseling centers has outpaced staff resources, leaving other campus partners to manage student crises until they are able to seek professional help. Due to their proximity and frequency of contact with students, these campus partners tend to be college student affairs professionals (Reynolds, 2010). However, student affairs professionals may be underprepared for the task of supporting students in this manner, and they may be ill-equipped to manage their own wellness as they act in professional helping capacities (Spano, 2011). Negative outcomes of professional helping can be varied and severe, but little scholarly attention has been paid to understanding outcomes of
student affairs professionals who support students experiencing trauma. One well-documented outcome in the fields of social work and counseling is secondary traumatic stress, or “…the stress resulting from helping or wanting to help a traumatized or suffering person” (Figley, 1999, p. 10). This dissertation sought to describe the essence of secondary traumatic stress as experienced by U.S. college student affairs professionals who have supported students through psychological trauma.

Using a phenomenological approach outlined by Moustakas (1994), as well as emerging techniques of art-based research, this study explored the narratives of 30 co-researchers who identified as a graduate assistant, professional, or faculty employed, or formerly employed, in a CAS-defined functional area, and also supported students through various psychological traumas (Wells, 2015). Through phenomenological analysis, the following themes emerged across co-researcher narratives: the cumulative nature of trauma support in higher education, inadequate professional preparation, resources, and guidance, professional’s self-efficacy as an effective support-person, impact of professional and organizational culture on the development of maladaptive views of student support, importance of personal and professional support networks, personal impact of professional’s relationship with student(s) in crisis, the negative impact of support-work on personal wellness.

Results of this study are significant to the field of college student affairs and U.S. higher education as they indicate the need for greater professional preparation in regard to counseling skills, reflection regarding the boundaries of the profession, and creating intentional professional and personal networks of support. Findings also supported and extended existing literature in other helping professions, undergirding the existence of negative outcomes that may stem from supporting individuals experiencing trauma.
Finally, given the dearth of empirical investigation related to outcomes of student support for student affairs professionals, specifically related to trauma stewardship, continued investigation of this topic is critical to the field of higher education. The flood of students coming into U.S. colleges and universities with trauma-related experiences, as well as traumatic events during their time in college, will not soon subside. Those working as college student personnel are uniquely positioned to assist students through personal trauma, yet they are not given the training and support needed to manage student crisis until the student can receive ongoing professional assistance. Professional expectations and culture place a great responsibility on these professionals to be student-centered, but do not explicitly set boundaries for when student-centered philosophies become damaging to those serving students. My own experience as a former residential life professional, while fulfilling and memorable, left me feeling broken, pessimistic, anxious, and rundown. The work of student affairs professionals is vital to the functioning of contemporary U.S. higher education and the success of college students, however, the individuals doing this work are equally as important and deserve the support, training, and resources to meet work expectations without sacrificing themselves.
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APPENDIX A

Visual Representations of Secondary Traumatic Stress in Higher Education

Thank you for agreeing to serve as a participant in my study on secondary traumatic stress in U.S. higher education professionals. Please review the information below regarding the activity I am requesting co-researchers to complete before our interview. Should you have any questions, points of clarification, or concerns, please do not hesitate to email me at rlync009@odu.edu.

Introduction: Historically, the visual arts have played a crucial role in human communication and meaning making. Creating and viewing art evokes emotion, aids in memory recollection, and communicates the human experience. The visual arts have also been used as a tool for processing experiences, particularly within the fields of counseling and psychology. The activity below serves as a primer before your interview with me to help you process your experiences with working with college students who have experienced trauma. Please note that you do not have to have any experience, talent, or interest in the visual arts to successfully complete this activity.

Art Project Instructions & Parameters: You are being asked to create a visual representation of your experience of secondary traumatic stress within the context of your work in student affairs. This project is intended to be primarily self-directed, however please take note that your final product must in some way convey the following:

- The traumatic event(s) in which you have acted in a support role
- Your emotions when recalling your work with students’ experiencing trauma
- The meaning you have made of the trauma experienced by your student(s).

Additionally, please avoid using personal photos of other people in your artwork, as these pieces may be published in the final manuscript.

Medium: There are no constraints in regards to the size or visual mediums used in this activity. Visualizations may be created electronically, painted, drawn, collaged, etc.

Submission Instructions: Upon completion of your art project, please take a digital photograph of your finished work. Your final work should take up the entirety of the photograph. Then email the photograph to the following secured folder by [INSERT DATE]. This folder is password protected and encrypted through Old Dominion University. Please label the photograph using your chosen/assigned participant pseudonym. ABR_Sub.d37z6l5zn3numqu@u.box.com
APPENDIX B

Semi-Structured Interview Protocol

Note: The following questions are examples of the content that was discussed in the interviews. In the interest of creating conversational space, questions evolved during interviews. Additionally, prior to the interview, co-researchers were thanked for their involvement, told about the study and the nature of the interview, reminded of their rights as a research participant, and asked for their permission to record the interview.

Trauma Subject-Object Association Activity

The following script was read to the co-researchers:
“As you may have gathered from the introduction to my study, student affairs practitioners are increasingly exposed to students experiencing various traumas. Take a moment to think about your work with college students who have experienced trauma.

I have listed some words on the [online] whiteboard. Please take 15 minutes to write down, or type, a few thoughts that come to mind for each of the words. You will not be required to reveal anything you have written that you are uncomfortable revealing. I will give you a five minute warning to let you know when the 15 minutes are coming to an end.

- Support
- Mood
- Trauma
- Community
- Distress
- Irritable
- Stress
- Guilt
- Alienation
- Avoidance
- Torn
- Angry
- Recurring thoughts

Now we will talk about the thoughts, feelings, and/or experiences that were brought to mind while reflecting on these words. You may decide which words to talk about, and I will ask follow up questions, but I will begin with an initial question: Were there any words that stood out more so than others?”

Art Project Discussion

“We will now spend the rest of our time together discussing the visual art activity you completed before our interview today.”

- What was your experience completing this activity?
Tell me about the medium you chose to use (pencil, paint, mixed media, etc.)
What feelings did it bring up?
What was challenging about it?
What discoveries did you make about yourself?
- Tell me about your finished product.
  - What event(s) inspired your work?
  - What emotions or thoughts are expressed in this piece?
  - How have you represented the meaning you have made from this students’ trauma?

Debrief

“I wanted to take time to thank you again for your extended participation in my study. Thus far you have completed the survey, the art activity, and now you have finished the interview portion…”

- Was there anything you thought I would ask during this interview that I didn’t, or were there things you wanted to speak on but I did not give you space to do so?
- What was your experience like participating in this study?
APPENDIX C

Recruitment Email

Hello,

My name is Jason Lynch, doctoral candidate in the Higher Education program at Old Dominion University in Norfolk, VA. I am writing to you today in hopes that you might assist me in my dissertation pilot study by participating in a 10-minute survey. I would also be deeply grateful if you would consider distributing this email to your staff. I have included a very brief description of the topic below.

http://tinyurl.com/SAPsecondarytrauma

As higher education professionals we are often tasked with supporting students through various life experiences, including trauma. However, we may rarely stop to understand the ripple effects of student trauma on ourselves and our organizations. Consider helping me in my dissertation pilot study to better understand the phenomenon of secondary trauma in U.S. higher education by taking 10 minutes to complete the survey below.

_ALL higher education professionals_ at all levels, graduate students in a student affairs program, and student affairs affiliated faculty are welcome to participate, regardless of their functional area or experience supporting students through trauma.

If you are interested, I will be sharing a link to a preliminary description of my findings if I reach my goal of 400 participants.

Warm Regards,

Jason Lynch
APPENDIX D

Development and Validation of the

Secondary Trauma in Student Affairs Professionals Scale (STSAPS)

Although this study approaches the concept of trauma and secondary traumatic stress using a broad definition of these terms, it is also important to recruit participants who self-report high levels of secondary trauma. In order to do so, I developed a scale that indicates the potential for secondary traumatic stress along four constructs highlighted in the DSM-V: Negative alteration to mood or cognition, arousal and reactivity, avoidance, and intrusive thoughts (American Psychiatric Association, 2013). The Secondary Trauma in Student Affairs Professionals Scale (STSAPS) was developed to indicate potential indications of secondary traumatic stress in those who are responsible for the holistic care and development of college students attending U.S. colleges and universities.

In its current form, the scale contains 29 items in addition to 11 demographic and supplemental questions. Items were derived from three sources: Bride, Robinson, Yegidis, & Figley’s (2004) Secondary Traumatic Stress Scale, Cieslak, Shoji, Luszczynska, Taylor, Rogala, & Benight’s (2013) Secondary Trauma Self-efficacy scale, and narratives of higher education professionals who have supported students through various traumas. Additionally, the items were reviewed for content validity by a panel of ten experts including higher education scholars, counselors, and higher education practitioners. When conducting a statistical test of reliability through confirmatory factor analysis, the Chronbach Alpha for the STSAPS was .94 (N=36).
APPENDIX E

Lynch & Glass (2017) Secondary Trauma in Student Affairs Professionals Scale (STSAP)

College student personnel increasingly support students who experience various traumas, deeply distressing or disturbing experiences.

What types of traumas have you supported students through?

On average, how often do you support students who have experienced trauma?

On average, how often do you serve on-call in your current role?

You indicated that you have supported students who have experienced [INSERT SELECTED TRAUMAS].

Think about your ability to deal with the effects of supporting students who have experienced trauma. To what degree is each statement true for you? (1-Untrue, 2-Somewhat Untrue, 3-Slightly Untrue, 4-Slightly True, 5-Somewhat True, 6-True)

I am capable of...
   ...managing various emotions while working with students who experienced trauma, e.g. anger, sadness, anxiety, etc.
   ...finding meaning in what happened to students who experienced trauma
   ...handling distressing thoughts about students who experienced trauma
   ...dealing with concerns that similar traumas may happen to me
   ...supporting other students after supporting students who experienced trauma
   ...coping with thoughts of being able to support students who experienced trauma
   ...seeking outside help to handle supporting students who experienced trauma

College student personnel sometimes report experiencing effects themselves from helping students who have experienced various traumas.

You indicated that you have supported students who have experienced [INSERT SELECTED TRAUMAS].

Think about your experiences supporting these students. To what degree has each statement been true for you? (1-Untrue, 2-Somewhat Untrue, 3-Slightly Untrue, 4-Slightly True, 5-Somewhat True, 6-True)

Supporting students who have experienced various traumas, has left me...
   ...feeling drained
   ...feeling discouraged about the future
   ...feeling guilt related to the traumatizing event the student experienced
   ...feeling empty
   ...feeling emotionally numb
...less interested in being around other people
...less physically active than usual
...interacting less with family
...interacting less with friends

Supporting students who have experienced various traumas, has left me…
...feeling easily annoyed
...feeling jumpy
...feeling something bad might happen
...overreacting to small annoyances
...having trouble concentrating
...having trouble falling asleep
...having trouble staying asleep
...engaging in binge drinking
...engaging in risky sexual behavior

Supporting students who have experienced various traumas, has left me...
...avoiding people, places, or things that reminded me of my work with students
...avoiding working with some students, if possible
...avoiding aspects of my job that remind me of interactions with students
...avoiding thinking about details of students' traumatic experiences
...using vacation or sick days to avoid being reminded of students traumatic experiences

Supporting students who have experienced various traumas, has left me...
...unintentionally thinking about my support of students who experienced trauma
...unable to stop thinking about the details of the trauma the student shar…
...feeling tense when thinking about supporting students who experienced tr…
...feeling upset encountering reminders of my support of students who exper…
...feeling as if I was reliving their traumas myself
...feeling as if I was reliving their traumas myself

What types of training have you received in regards to supporting students who have experienced various traumas?

Are you currently enrolled in a graduate program?

What is your level of professional experience?

Please check the functional area(s) that describe your current position from the list below

Please list your highest degree and subject area, e.g. B.S. Economics, Master’s in Social Work, Master's in College Student Personnel, PhD in Higher Education, etc.

What is your racial identity?

What is your ethnic identity?
What is your gender identity?

What is your sexual orientation?

Would you be interested in participating in a follow-up interview regarding secondary traumatic stress in higher education professionals?

If you select that you are interested in participating in the follow-up study, your responses would be considered confidential, NOT anonymous, as your name and email address would be linked to your responses. However, responses will only be available to the researchers listed in the participant agreement form. All responses will be kept within a password protected electronic environment. Additionally, all data will be stored for at least five years after the project closes. Five years after the conclusion of the study, the data (responses to the survey) will be destroyed. For more information, please refer to ODU IRB Submission #912111-1.

Preferred Name: ____________

Please provide your email address: ________________

*Please do not distribute this instrument without express permission from the authors.*
# APPENDIX F

## Co-Researcher Profiles

*Thematic Summaries of Individual Co-Researchers*

<table>
<thead>
<tr>
<th>Co-Researcher</th>
<th>Current Functional Area</th>
<th>Demographic Information</th>
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</table>
| Angie         | Civic Engagement and Service-Learning Programs | • Mid-Level  
• Master’s Degree  
• Degree in Counseling  
• Northeast U.S.  
• Public University  
• PWI  
• Straight  
• White  
• Female  
• STSE: 5.43  
• STSAP: 3.35 |
| Bernadette    | LGBT Programs & Services | • Mid-Level  
• Master’s Degree  
• Degree in Higher Education  
• Southwest U.S.  
• Private University  
• PWI  
• White  
• Lesbian  
• Female  
• Degree in Counseling  
• STSE: 5.43  
• STSAP: 3.35 |
| Beth          | Housing & Residence Life | • New Professional  
• Master’s Degree |
Bonnie

Campus Activities

- Southeast U.S.
- Public University
- HBCU
- White
- Female
- Queer
- Degree in Higher Education
- STSE: N/A
- STSAP: N/A

Chloe

Sexual Violence-Related Programs & Services

- Mid-Level
- Master’s Degree
- Midwest U.S.
- Public University
- PWI
- White
- Bisexual
- Female
- Degree Topic N/A
- STSE: 5.86
- STSAP Score: 5.39

Clarissa

Campus Activities

- Mid-Level
- Master’s Degree
- Northeast U.S.
- Private University
- PWI
- White
• Female  
• Straight  
• Degree in Higher Education  
• STSE Score: 4.86  
• STSAP Score: 4.30

Coleman  
Housing & Residence Life

• New Professional  
• Northeast U.S.  
• Private University  
• PWI  
• White  
• Male  
• Straight  
• Degree in Higher Education  
• STSE Score: 5.14  
• STSAP Score: 1.67

Elizabeth  
Student Conduct

• Mid-Level  
• Master's Degree  
• Southeast U.S.  
• Public University  
• PWI  
• White  
• Straight  
• Female  
• Degree in Higher Education  
• STSE Score: 3.75  
• STSAP Score: 6.00

Jane  
Housing & Residence Life

• Graduate Assistant  
• Bachelor’s Degree  
• Northeast U.S.  
• Public University  
• PWI  
• Asian  
• Female  
• Queer  
• Degree in Critical Theory  
• STSE Score: 3.80  
• STSAP Score: 4.14
Jose
• Graduate student
• Bachelor’s Degree
• Northeast U.S.
• Public University
• PWI
• Multiracial
• Male
• Straight
• Degree in Political Science
• STSE Score: 4.57
• STSAP Score: 5.30

*Interview recording malfunctioned, resulting in no transcript.

Karl
• Mid-Level
• Master’s Degree
• Western U.S.
• Private University
• PWI
• Black
• Male
• Straight
• Degree in Education
• STSE Score: 4.57
• STSAP Score: 4.74

Krista
• Mid-Level
• Master’s Degree
• Western U.S.
• PWI
• White
• Female
• Bisexual
• Degree in Higher Education
• STSE Score: 4.86
• STSAP Score: 3.87

Leslie
• Senior Level
• Doctoral Degree
• Northeast U.S.
• PWI
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<th>Gender</th>
<th>Sexual Orientation</th>
<th>Education</th>
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<th>STSAP Score</th>
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<td>Luke</td>
<td>Campus Activities</td>
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<td>Margaret</td>
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<td>Matt</td>
<td>Student Leadership Programs</td>
<td>Male</td>
<td>Straight</td>
<td>Degree in Agricultural Science</td>
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<tr>
<td>Name</td>
<td>Position</td>
<td>Education</td>
<td>Location</td>
<td>Gender</td>
<td>Sexual Orientation</td>
<td>Degree or Field</td>
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<tr>
<td>Monica</td>
<td>Sexual Violence-Related Programs &amp; Services</td>
<td>New Professional</td>
<td>Midwestern U.S.</td>
<td>Female</td>
<td>Bisexual</td>
<td>Degree in Creative Writing</td>
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<tr>
<td>Rachel</td>
<td>Housing &amp; Residence Life</td>
<td>Graduate Assistant</td>
<td>Southeast U.S.</td>
<td>Female</td>
<td>Straight</td>
<td>Degree in Higher Education</td>
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<tr>
<td>Ramon</td>
<td>Senior Student Affairs Administrator</td>
<td>Senior Level</td>
<td>Northeast U.S.</td>
<td>Male</td>
<td>Straight</td>
<td>Degree in Higher Education</td>
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<td>Reilly</td>
<td>LGBT Programs &amp; Services</td>
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<td>Midwest U.S.</td>
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<tr>
<td>Rene</td>
<td>International Student Programs &amp; Services</td>
<td>Female</td>
<td>Straight</td>
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<td>Scott</td>
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<td>Male</td>
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<td>Name</td>
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<td>Segunda</td>
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<td>Sophia</td>
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<tr>
<td>Tanner</td>
<td>Housing &amp; Residence Life</td>
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<td>3.30</td>
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</table>
Therese
Higher Education Faculty
• Faculty
• Doctoral Degree
• Western U.S.
• Public University
• PWI
• White
• Female
• Bisexual
• Degree in Higher Education
• STSE Score: 5.29
• STSAP Score: 2.09

Veronica
Graduate & Professional Student Services
• Senior Level
• Doctoral Degree
• Western U.S.
• Public University
• PWI
• White
• Straight
• Female
• Degree in Higher Education
• STSE Score: 5
• STSAP Score: 3.04

Wiggum
* Interview recording malfunctioned, resulting in no transcript.
Campus Activities
• New Professional (Former SAP)
• Master’s Degree
• Southeast U.S.
• Public University
• PWI
• Asian
• Straight
• Male
• Degree in Higher Education
• STSE Score: 3.86
• STSAP Score: 3.35

Xavier
Health Promotion Services
• New Professional
• Master’s Degree
• Northeast U.S.
- Public University
- PWI
- Biracial
- Male
- Queer
- Degree in Higher Education
- STSE Score: 5.43
- STSAP Score: 3.22
APPENDIX G

Informed Consent Form

Dear Participant:

The purposes of this form are to give you information that may affect your decision whether to say YES or NO to participate in this research, and to record the consent of those who say YES. You are being asked to participate in a research project. Researchers are required to provide a consent form to inform you about the study, to convey that participation is voluntary, to explain risks and benefits of participation, and to empower you to make an informed decision. You should feel free to ask the researchers any questions you may have.

Study Title: A Phenomenological Exploration of Secondary Traumatic Stress in U.S. Student Affairs Professionals

1. RESEARCHERS:

Chris Glass, Ph.D., Responsible Project Investigator, Assistant Professor, College of Education, Department of Educational Foundations and Leadership, Old Dominion University

Jason Lynch, M.S., Investigator, Doctoral Candidate, Higher Education Program, College of Education, Department of Educational Foundations and Leadership, Old Dominion University

2. PURPOSE OF RESEARCH:

As a higher education professional, you are being asked to participate in a research study exploring the experiences of professionals who self-report incidents of secondary traumatic stress in their work. Your participation will contribute to the knowledge surrounding how student affairs professionals may experience secondary trauma, also known as vicarious trauma. This study, entitled A Phenomenological Exploration of Secondary Traumatic Stress in U.S. Student Affairs Professionals is conducted by Dr. Chris Glass and Jason Lynch. Please note that if you are under 18 years old, you are not able to take part in this study.

3. WHAT YOU WILL DO:

You will be asked to complete a simple self-directed visual art project, as well as participate in a two-hour follow-up interview.

4. RISKS AND BENEFITS:

As with any research, there is some possibility that you may be subject to risks that have not yet been identified. You may experience some psychological discomfort as you recall past experiences in reflecting on the questions asked in the interview, depending on your individual experiences.

Materials, while confidential, may be subject to federal subpoena but every effort will be made to protect the confidentiality of the participants. There are no direct benefits for participation in the study. The researchers may choose to retain those benefits described as potential or indirect.
5. PRIVACY AND CONFIDENTIALITY:
Interview responses and art activity results are considered anonymous and will not be linked to your name or other directly identifiable information. All research materials, including recordings, transcripts, and art activity results, will be kept within a password protected electronic environment. Additionally, all data will be stored for at least five years after the project closes. Five years after the conclusion of the study, the data (responses to the survey) will be destroyed.

6. YOUR RIGHTS TO PARTICIPATE, SAY NO, OR WITHDRAW:
Your participation is completely voluntary. It is OK for you to say NO. Even if you say YES now, you are free to say NO later, and walk away or withdraw from the study. You may choose not to participate at all, or to answer some questions and not others. You may also change your mind at any time and withdraw as a participant from this study with no negative consequences. Your decision will not affect your relationship with Old Dominion University, or otherwise cause a loss of benefits to which you might otherwise be entitled.

7. COSTS AND COMPENSATION FOR BEING IN THE STUDY:
You will receive no compensation for participating in this study.

8. COMPENSATION FOR ILLNESS AND INJURY:
If you say YES, then your consent in this document does not waive any of your legal rights. However, in the event of (…harm, injury, or illness…) arising from this study, neither Old Dominion University nor the researchers are able to give you any money, insurance coverage, free medical care, or any other compensation for such injury. In the event that you suffer injury as a result of participation in any research project, you may contact Dr. Chris Glass, Responsible Project Investigator at 757-683-4118 or Jason Lynch, Investigator, at 910-840-7112, Dr. Petros Katsioloudis, current Chair of the Darden College of Education Human Subjects Review Committee at pkatsiol@odu.edu, or the Old Dominion University Office of Research at 757-683-3460 who will be glad to review the matter with you.

9. CONTACT INFORMATION FOR QUESTIONS AND CONCERNS:
If you have any questions later on, then the researchers should be able to answer them, please contact the researchers Jason Lynch at rlync009@odu.edu or Dr. Glass, Responsible Project Investigator, at crglass@odu.edu.

If you have questions or concerns about your role and rights as a research participant, would like to obtain information or offer input, or would like to register a complaint about this study, you may contact, anonymously if you wish, Dr. Petros Katsioloudis, current Chair of the Darden College of Education Human Subjects Review Committee at pkatsiol@odu.edu, or the Old Dominion University Office of Research at 757-683-3460 who will be glad to review the matter with you.

10. VOLUNTARY CONSENT:
By signing this form, you are saying several things. You are saying that you have read this form or have had it read to you, that you are satisfied that you understand this form, the research study, and its risks and benefits. The researchers should have answered any questions you may have had about the research. If you have any questions later on, then the researchers should be able to answer them: Jason Lynch at rlync009@odu.edu or Dr. Glass, Responsible Project Investigator, at crglass@odu.edu.
If at any time you feel pressured to participate, or if you have any questions about your rights or this form, then you should contact Dr. Petros Katsioloudis, current Chair of the Darden College of Education Human Subjects Review Committee at pkatsiol@odu.edu, or the Old Dominion University Office of Research at 757-683-3460 who will be glad to review the matter with you.

And importantly, by signing below, you are telling the researcher YES, that you agree to participate in this study. The researcher should give you a copy of this form for your records.

Subject’s Printed Name & Signature

Date

11. INVESTIGATOR’S STATEMENT:

I certify that I have explained to this subject the nature and purpose of this research, including benefits, risks, costs, and any experimental procedures. I have described the rights and protections afforded to human subjects and have done nothing to pressure, coerce, or falsely entice this subject into participating. I am aware of my obligations under state and federal laws, and promise compliance. I have answered the subject's questions and have encouraged him/her to ask additional questions at any time during the course of this study. I have witnessed the above signature(s) on this consent form.

Investigator's Printed Name & Signature

Date

COLLABORATIVE INSTITUTIONAL TRAINING INITIATIVE (CITI PROGRAM)

COURSEWORK REQUIREMENTS REPORT*

* NOTE: Scores on this Requirements Report reflect quiz completions at the time all requirements for the course were met. See list below for details. See separate Transcript Report for more recent quiz scores, including those on optional (supplemental) course elements.

- Name: Chris Glass (ID: 1697819)
- Email: crglass@odu.edu
- Institution Affiliation: Old Dominion University (ID: 1771)
- Institution Unit: Educational Foundations & Leadership
- Phone: 757-683-4118
- Curriculum Group: Social & Behavioral Research - Basic/Refresher
- Course Learner Group: Same as Curriculum Group
- Stage: Stage 3 - SBE 201 refresher
- Description: Choose this group to satisfy CITI training requirements for Investigators and staff involved primarily in Social/Behavioral Research with human subjects.
- Report ID: 15471675
- Completion Date: 09/07/2015
- Expiration Date: 09/06/2016
- Minimum Passing: 80
- Reported Score*: 80

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<th>REQUIRED AND ELECTIVE MODULES ONLY</th>
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For this Report to be valid, the learner identified above must have had a valid affiliation with the CITI Program subscribing institution identified above or have been a paid Independent Learner.

CITI Program

Email: citisupport@miami.edu
Phone: 305-243-7970
Web: https://www.citiprogram.org
APPENDIX H

IRB Approval Memo

OFFICE OF THE VICE PRESIDENT FOR RESEARCH

4111 Monarch Way, Suite 203
Norfolk, Virginia 23508

Mailing Address
Office of Research
1 Old Dominion University
Norfolk, Virginia 23529
Phone (757) 683-3460
Fax (757) 683-5902

DATE: August 12, 2016

TO: Chris Glass, PhD
FROM: Old Dominion University Education Human Subjects Review Committee

PROJECT TITLE: [943305-1] Who Helps the Helpers? A Phenomenological Exploration of Secondary Traumatic Stress in U.S. Student Affairs Professionals

REFERENCE #: 
SUBMISSION TYPE: New Project

ACTION: DETERMINATION OF EXEMPT STATUS
DECISION DATE: August 12, 2016

REVIEW CATEGORY: Exemption category # [6.2]

Thank you for your submission of New Project materials for this project. The Old Dominion University Education Human Subjects Review Committee has determined this project is EXEMPT FROM IRB REVIEW according to federal regulations.

We will retain a copy of this correspondence within our records.

If you have any questions, please contact Petros Katsioloudis at (757) 683-5323 or pkatsiol@odu.edu. Please include your project title and reference number in all correspondence with this committee.

This letter has been electronically signed in accordance with all applicable regulations, and a copy is retained within Old Dominion University Education Human Subjects Review Committee’s records.
Angie’s visual representation of supporting students through traumatic events. The image conveys the duality of supporting students through traumatic experience using contrasting colors and the representation of love and community (the heart), as well as anger and sadness (the tear).
Bernadette’s visual representation of supporting students through traumatic events. Bernadette uses marker and pen to colorfully highlight the sometimes chaotic, segmented and hidden experiences of trauma support work.
Bonnie’s visual representation of supporting students through traumatic events. Created from colored pencil on typing paper, she conveys her journey in processing the various student traumas she has been involved with, the sadness she experiences, and her lack of sharing her experiences with peers or colleagues.
Cloe’s visual representation of supporting students through traumatic events. She uses marker and paper to illustrate how her work centers around her heart, as well as how different trauma support incidents are segmented within her hear.
Clarissa’s visual representation of supporting students through traumatic events. She uses crayon and paper to depict the cumulative impact of various traumas through which she supported students.
Elizabeth’s visual representation of secondary traumatic stress. Using marker, colored pencil, and sketch paper, she depicts balance and support she receives as she supports students experiencing trauma.
Jane’s visual representation of secondary traumatic stress. Using water color paper and water color pencils, she depicts the impact of trauma support work through representations of sleeplessness, raw exposure, and constant unease.
Karl’s visual representation of supporting students through traumatic event. This representation used found-art sculpture to depict the bottleneck feeling of the volume of students experiencing trauma passing through his care as an individual support-person.
Leslie’s visual representation of supporting students through traumatic events. She uses collage to depict an individual traumatic event that took the lives of several students at her institution. The collage was meant to represent the intrusive thoughts of the event and the constant need for more information while serving as an institutional leader.
Luke’s visual representation of secondary traumatic stress. Using Adobe Photoshop, he depicts how he envisions himself as a barrier or defense for students experiencing trauma. A superhero is centered in this piece, attempting, unsuccessfully, to shield others from an ever-encroaching darkness.
Margaret’s visual representation of secondary traumatic stress. Using Adobe Photoshop, she sought to convey the feeling of dissociation or avoidance of dealing with thoughts and feelings associated with supporting students through trauma.
Matt’s visual representation of supporting students through traumatic events. Using markers, he depicts his thoughts as he lays in bed.

The dots represent the pieces of students he describes as being ground up in the university-machine.
Monica’s visual representation of supporting students through traumatic events. She conveys a sense of brokenness and her need to stitch together the pieces of students who were marred by trauma.
Rachel’s visual representation of supporting students through traumatic event. Using dark and light paints, she depicts the journey one takes through traumatic events, commenting on the traumatic growth that may occur.
Ramon

The image that overwhelmingly comes to mind is a labyrinth. Walking alongside the primary traumatized student.

As you walk the labyrinth – a number of emotions are being expressed, exchanged, and “worked out.” This foregrounds the sense making process. Anger, fear, loneliness, questioning, existential questions. But beyond emotions it’s the “working it out” – coping, resilience, returning to normalcy, choosing to avoid.

Sense making or meaning making – moving towards resilience, this sucks, sitting, wading, conquering, coping, bouncing back, seeking care, seeking community, honoring a life, my new me, accepting the bitterness, making a decision for healing.

Ramon’s visual representation of supporting students through traumatic events. He uses clipart and direct phrases to compare trauma support to a journey through a labyrinth.
Reilly’s visual representation of supporting students through traumatic events. His representation is meant to convey external pressures from students in crisis, as well as his own internal monologue.
Rene’s visual representation of secondary traumatic stress. Chosen to represent Theme 1, her visualization uses pencil and plain typing paper to depict the seemingly never ending nature of student trauma support.
Scarlett’s visual representation of supporting students through traumatic events. Using pastels, she drew an image of a lotus flower to show how beauty can emerge from the murkiness of trauma.
Scott’s visual representation of supporting students through traumatic events. Scott uses woodwork to depict the parts of students that stick with him over time. He described his work as unfinished, stating that he would be adding clock apparatus to the wood in order to create a clock.
Segunda’s visual representation of supporting students through traumatic events. Using paper and pen, she realistically maps out her thoughts regarding trauma support and depicts the connectedness of trauma to issues of social justice.
Sophia’s visual representation of supporting students through traumatic events. She used pencil and paper to illustrate a scene of supporting a student in crisis, while internally struggling with experiencing a similar crisis.
Tanner’s visual representation of supporting students through traumatic events. He uses Photoshop to create a word map to show his thoughts and feelings regarding his support of students through a crisis such as sexual assault.
Therese’s visual representation of supporting students through traumatic events. Driven by the experience of working with feminist activist who experienced hate crimes or sexual assault, she used metal working to create this piece. She wanted to find the silver lining in her experiences. The piece melds together the ugly and the beautiful and was inspired by Shell Silverstien’s *The Giving Tree.*
Veronica’s visual representation of supporting students through traumatic events. Parts of this representation have been blurred to protect the anonymity of the co-researcher. Printed from her original job description, she used digital collage to describe how student needs have evolved beyond what she originally signed up or and what she was prepared for.
Wiggum’s visual representation of supporting students through traumatic events. Using clip-art, he depicts varying stories, emotions, and values such as sadness and justice.
Xavier’s visual representation of supporting students through traumatic events. He uses mixed media collage to depict emotional and cognitive chaos that students experience during a traumatic event, as well as his own experiences supporting students through trauma.
## APPENDIX J

### Co-Researcher Supplemental Quotes

**Relevant Co-Researcher Quotes Supporting Themes 1 & 2**

<table>
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<tr>
<th>Co-Researcher</th>
<th>Theme 1: Cumulative nature of trauma support in higher education</th>
<th>Theme 2: Inadequate professional preparation, resources, and guidance</th>
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<td>Bernadette</td>
<td>• I think a lot of people who do this work, it’s because there has been a trauma there themselves. And so you have to combine both how work affects you but also how past trauma affects you. - Bernadette pg. 6</td>
<td>• I was very lucky because my graduate assistant ... I actually did more trauma than I probably do currently. So, I would say my supervisor at my graduation assistantship was very good, very good, about talking about trauma and talking about how it was affecting us. And she had a social work background so I think that was helpful too. If I just had my classes, I don’t think it would have been that helpful. But I think student affairs is very apprenticeship. - Bernadette P. 14</td>
</tr>
<tr>
<td>Beth</td>
<td>• I think I would fall apart, I really do. But I feel like it’s gotten to the point where I’m almost negating the fact that I’m a human being, the fact that I’m not even feeling these things anymore. I’m torn, I’m trying to figure out how to keep my feelings in-tact and let myself feel and not bottle these things, but at the same time the bottling and not feeling is the only thing keeping me going. Because there’s just so</td>
<td>• I think definitely even if it’s just one class on counseling and I think – actually, I don’t know how people who don’t have any background in psychology or mental health are doing this job. I don’t know how they’re doing it because I have a bachelor’s degree and a year of experience working with teenagers with mental health issues, and I struggle every day. So, more of a counseling</td>
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much going on that I can’t take it all on kinda thing. Beth Pg. 9

aspect to our degree if you’re not planning on going into administration. Beth Pg. 11

- I think required counseling for people who work directly with students, whether that be once a month, whether that be once a week, I think it really depends but I think coming from a place, coming from the background that I’m coming from, I feel like if counseling was required for people in our profession, we would, I don’t know, we would have somebody to unload the trauma on even if it’s once a month. Specifically for people in res. life and people who work with underrepresented groups, just because of the stuff that we have to deal with. My mother is not a counselor so me talking on the phone with my mom is not helping. My colleagues are going through the same stuff that I am so talking to them, while it’s nice, it’s not really helping me work through some of the issues that are coming up. I think the other thing that would be beneficial is classes within our graduate degrees that go over even the brief knowledge on how to counsel a student on simple things. Or language, what shouldn’t we say to a student who’s having suicidal ideation? While it may be common sense for me, that doesn’t mean it’s necessarily common sense for another person, so I think that would take a load off my shoulders, knowing that the entire team knows how to sit down with a student who’s struggling
So I, working as a hall director, I found a student – well, I was called to a reference hall room and a student and her entire bathroom was covered in blood. And so after that incident, so still being on call, that week and then weeks after that, if I got a call, or even if I didn't get a call I might wake up in the middle of the night for no reason and just like picture blood everywhere. Yeah. And so I think it was particularly hard for me because in the past I had dealt with thoughts of suicide, so seeing this student covered in blood and just – I mean, I was the first person there. And so it was really kind of shocking and I felt really bad for the students that because her roommates were there, and they were the ones that originally found her. So I think it was hard for me to help them when I was just in that shock myself. Bonnie Pg. 1

• So, when I started, I had a three-day training. The first two were more like what we were supposed to be doing as a hall director, like the rules and regulations. We had a one-hour training with public safety on how you respond to incidents in collaboration with them. And then we had a one-hour training with the counseling center on how you work with students who are depressed. But it was mainly like how we were working with students. I think I remember the counseling center saying, "If you need anything, you can contact us." It's like a small university. And it may feel like there's not really anyone to talk to. But that was kind of – I remember that just being mentioned once and feeling like okay. I think in general I need someone to mention something at least a couple times to feel comfortable. And I just met them like three days before that, too. Bonnie Pg. 10

• And I think what you said before, too, about the train. So I really felt like not prepared at all to go into my first incident. I don't know if you really can feel super prepared for some of the things I saw. But more I think reflection, either before the fact or after the
fact about how professionals are doing after they've dealt with a crisis I think is really important. Because just at the institution that I worked at, the retention rate of hall directors was abysmal. Like so people would stay like one year, one and a half years, or two years. No one stayed more than like two and a half years as a hall director there. So I think if we want to increase support for professionals – because one thing I mentioned to them, too, is like the long-term retention of professionals in student affairs. Bonnie Pg. 18

• And so if you're going into this field and if you've already had – I had this hypothesis that you already have kind of like – a lot of professionals already have had – emotional concerns, like depression or something that they're going into student affairs because they want to help people. And so they're already at a higher risk or kind of going through that spiral of depression. Yeah. So I when I started my Ph.D. program the counselor here said, "If you're adding more stress, you have to like add something." And I wish someone would have said that, like add something positive to help yourself. So I wish someone had said that before I started my first job. Bonnie Pg. 19
• so on a pretty regular basis, I'm working with victims of sexual violence. On any given day, I have probably two to three cases that I'm dealing – not dealing with, but I'm working with and working on. And then in addition, providing supervision and support for the six advocates that are on a rotating basis that are on call. -Chloe Pg. 2

• Yes, it's 1,450 students. I'm the only paid position that does the work. There are Title IX people, and then I have six staff and faculty volunteers who serve as advocates as well. Chloe P. 3

• And part of it was that I can't help her. Like, I'm saying everything that I can think of saying, but I can't help her. And part of it was that, I was like this is beyond what I can do. It was – I think part of it also was framing up her saying every single thought in her head was bringing up all the different cases in my head that I've dealt with over these past, I don't know, since I became an advocate when I was a freshman in college. So these past, like, 12 years or 14 years or however long it's been, I think some of these phrases that she would tell me just brought up some of the past cases that I've dealt with. And so it was just like all at once it hit me, and – I don't know. I'm not sure what else to say. Chloe Pg. 8
• So I drew three separate instances that occurred. So kind of them adding up over time...Again, just a lot, a lot, a lot – so many emotions, so much sadness, frustration. Then again, myself feeling like, okay, now I’ve helped all of them for the last two or three weeks, now I have to be a witness. And a lot of us felt that way. -Clarissa pg. 7 & 9

• Then we had another. Just it kept adding up and then the election and everything that happened post-election both in the world and on our campus. So it felt a lot harder for me and for many of my colleagues. I feel like we had time after to deeply ______ back to what you were talking about earlier in whatever way we would need to. It went from one to the next to the next, then it overlapped – which then you really feel like what is my capacity to support and to be helpful and to be patient with the other things that I still have to do, because I still have to do the rest of my job and I still need to you know – when a colleague asks for something, you think oh, for goodness sake – you _____ need too. So I think it felt so much worse, for so many of us this semester and that that made more tears. I think our quality of work – just – it can’t be as good. And that’s frustrating. I have an expectation on myself for excellence, I do not expect perfection – and I talk about this with my team as well – I do not expect perfection, but I expect excellence. I expect people to work really hard and to do the best work that they can do and to have fun while they’re doing it. And it

• I think it’s assumed that there are only certain functional areas to do with this, or that you only have to deal with it once you get to a certain level, like dean of students or something like that. So I think it probably felt like it might be too early for some of us to think about, so you’re going to whatever your first job is after grad school or you may go into res life which is on call and those are the people who might handle it. So I don’t know that it’s seen as something that is beneficial to all higher educational professionals, regardless of functional area. So I don’t think it was a major focus of our program. But I don’t know if it is of many. I only have my own to reference. But I don’t think a lot of folks feel like we’ve got excellent training around that from graduate school…..?” I really didn’t think I would need it, because I’m going into student activities – I don’t need that. And then I got hired for a job, and I was never even an RA. -Clarissa Pg. 4

• We do have the EAP which again, is touted the employee assistance program. They have all these resources. So it again, it’s talked about but I think there might need to be something that is already set up and ready to go or saying you know, there are three counselors through the AP that are really good at this and I recommend you
is really hard to do that when there are so many incidences in either a short amount of time, all at once, over the course of a semester. And this semester has felt like we were pushing a lot of stuff out to get it done because we had to because we were managing so many other things, whereas other semesters we would have maybe one major thing that happened and so it felt easier to manage. - Clarissa Pg. 11

- Sometimes it’s god willing, never again. And you just do it because it’s important and it’s part of the job and it makes the quality of life of our student better, they know they have people to get to, they know their resources, they feel supported, this is their home. But when you stop and really think about the amount of things that happen, and the amount of things that you have no idea about, right? Clarissa Pg. 14

- Certainly being on call and having those things – certainly that was incredibly helpful. Also being able to observe what my colleagues did, or my superiors. Especially when I was student life on call, to learn from the deans on call about how they would handle something, or we would talk something through. And brainstorm like what do we think we should do about this. So to have that back and forth and that conversation and thinking things through was incredibly helpful and I think has helped me to be a more strategic person to think through things instead of just go right to action, because that’s my gut – got to fix, got to make it better, to make sure that I stop and really think through. Which again, is stuff that we talked about in graduate school. But I hadn’t really had an opportunity to practice connecting with them. Because I do think just that little extra step of almost starting the process for people would make folks feel like, okay, then now I know where to go, yes, I should do this, I need to process this too. I don’t think it’s bad that we aren’t given resources, we are. I do think that sometimes having that first step. Because we often do that with our students too. Like, “IT sounds like you might need to talk to somebody, do you want me walk you over to counseling and set something up?” So maybe something like that. Clarissa Pg. 6
so much. But I have at my institution, which I’m really thankful for. I think the collaborative nature of this school is something I appreciate all of the time in so many different aspects of my role, but particularly when it comes to the care of our students. The philosophy is the care and concern and they live up to that and it is absolutely a group effort, again, when applicable. Clarissa Pg. 15

- It's kind of like when you study for a test and then you take the test and then you put all the information down and then it's like brain dump. That's kind of my style. I mean, sometimes you will, occasionally. But these cases that are like – it's like pulling a gray hair, like you hear that term, like you pull one and five comes to its funeral. So there's a relief when it's off your plate, but it's almost like it doesn't matter because I'm like, "All right. Well, now I can work on my three other cases." So it's almost like all that energy that went into managing that one case and all those emotions that were tied up to that just go into the next batch of cases. -Elizabeth Pg. 14

- So the main thing that I do in my role now is Title IX. So that's probably about 50 to 75 percent of my work. And I'm really one of the only people in my office that does all this stuff, so I touch pretty much every case. And so that's why that was the prominent part of that conversation. And maybe this stuff is kind of literal, but the giant pencil is like I fill up
notebooks, right? Or I take notes. You can write a book with this stuff. And it takes a lot of coffee. - Elizabeth Pg. 6

- It’s a bit of a mix of both. When things are going to back to back, it was more of self-preservation thing for me to be able to handle multiple situations of that nature. But at the same time, the detriment is we start being a little less human with the student and especially in those situations that’s typically what you need a lot of. Jose Pg. 10

- I had a student commit suicide. So that person committed suicide in May, and then I had one commit suicide in August and one commit suicide in September. All three students that I worked with, all within the course – that four months. Krista

- These other traumas that are less acute and ongoing to me are much more complicated. They're not as intense but they're cumulatively a lot harder to deal with because a lot of times there's no resolution. Then even if the trauma subsides, the acute episodes, oftentimes it's just deferred. It's going to come back, whatever it is. Matt Pg. 19

- “I think for me the experience – I don’t want to say constant, but the repeated experience with students and families and faculty and others in the process of trauma has I think just opened up my perspective. It has made me see the complexity of it. It has made
me see, I think, the rawness – that word "raw" keeps coming up for me – and the real humanness of it. Ramon pg. 5″

• It’s a bit of a mix of both. When things are going to back to back, it was more of self-preservation thing for me to be able to handle multiple situations of that nature. But at the same time, the detriment is we start being a little less human with the student and especially in those situations that’s typically what you need a lot of

Rene

• For mood, I would say, based on the job or the position, generally, working with students is like – it evokes some tension or stress, to me, due to the volume of students that I have to help. Sometimes, I get depressed thinking of that, or like I'm falling short, or that I just feel depressed that I can't give to all students as much as I should. Rene pg. 1

Segunda

• We have a master’s program and they gravitate towards that because they think that being in a graduate program will help them sort through some trauma that they’ve experienced and will help them make the world a better place. And I’d like to believe that, but the other thing is that grad school is rough. It’s very demanding. Segunda pg 4
• 'cause as a student affairs professional, we're always taught to be like social justice pioneers or social justice warriors, but yet we're not given any tools. I think that the social justice warrior bit often times gets in the way of someone who needs to collect a paycheck. Sophia pg. 2
### Relevant Co-Researcher Quotes Supporting Themes 3 & 4

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<th>Participant</th>
<th>Theme 3: Professional’s self-efficacy as an effective support-person</th>
<th>Theme 4: Impact of professional and organizational culture on the development of maladaptive views of student support</th>
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<td>Bernadette</td>
<td>- But I had a situation where a student had been sexually assaulted prior, when they were on campus, with wondering whether or not that was an appropriate response. But then was sexually assaulted off campus and then was sad after as an alumnae and was still connecting with me, that she was upset that she couldn’t get some of the resources that she got on campus. So, there wasn’t even anything that could happen, which helped resolve some of those issues for me. Because now I could see, okay, so if we are reporting to the university there’s things we can always do so now she was wishing she could have done it, whereas before she was not always happy with the having to report. -Bernadette Pg. 2</td>
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<td>- And then “guilt,” I just had a student death like two weeks ago so a lot of stuff going on – could I have done better? Would I have noticed more if I did certain things? - Bernadette Pg. 1</td>
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<td>- I think for me it’s that I had a trans student commit suicide and so he was always someone who would pop in. He wasn’t someone who was someone I’d see every day so in some ways I think it’s a little bit more separated. But it is that aspect of what could you – can you make a fairly conservative place in Texas better? Is that just you? Is that a community effort? Is that something you can switch? Is that something</td>
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you could have done more pushing? But I think in the same respect it’s also knowing that he would pop in when he could. So knowing this was a space that he felt he could pop in. So, it’s that double-edged sword and then you also have that there’s been lots of attempts and this is the first one that actually went through with it. And so I know I think I’m at 12 and 1, so 12 in the good column I would say and 1 in the bad column isn’t horrible odds. But I think those also are different questions. Sometimes you know the results, sometimes you don’t. You saved them for a night. –Bernadette

- But I had a situation where a student had been sexually assaulted prior, when they were on campus, with wondering whether or not that was an appropriate response. But then was sexually assaulted off campus and then was sad after as an alumnae and was still connecting with me, that she was upset that she couldn’t get some of the resources that she got on campus. So, there wasn’t even anything that could happen, which helped resolve some of those issues for me. Because now I could see, okay, so if we are reporting to the university there’s things we can always do so now she was wishing she could have done it, whereas before she was not always happy with the having to report. -Bernadette Pg. 2
I don’t. I think I’ve just gotten so busy that I’ve stopped taking care of myself, and it’s almost like I’m turning into one of the students. I’m becoming desensitized to it. Like when we had the shooting Sunday, it was just like, okay, this happens all the time here. Students have to deal with this all the time. It didn’t even raise an emotion within me. It was just go into work mode. We have to make sure the students are okay and move on. So, I’m not dealing with it in the healthiest way and I think I can recognize that. But I’m not is the answer. -Beth Pg. 6

And it’s just when a shooting like that is brought up three or four times in a day, it can get draining. Especially when you were there and you were 100 yards away from it when it happened, and you didn’t feel anything because you were just desensitized to it. And now you’re faced with students who are finally working through those emotions and finally feeling, you’re confronted with what that looks like. And it brings that humanity back into it. It’s almost like I finally had to face that even though I was desensitized that it happened, that it’s terrifying, and this is where I work. So, that was – yeah. Beth Pg. 8

So I feel like in the situations that I’ve been in I feel guilty because I get to go home and I get to be happy. I get to leave these issues at
the door. Granted I don’t because I’m going home and feeling guilty but I have that option, and I feel like in a lot of these situations there’s nothing I can do for a student. So, I feel guilty that they’re coming and sharing all this important and hard stuff and I have to sit there and nod my head and act like I know what I’m doing. And act like I can help in some way other than listening. ‘Cause I don’t feel, I don’t know, equipped all the time and I just feel guilty because I feel so unhelpful. I think I was a much happier person, I think I had a much brighter outlook on the world. I think since entering student affairs that naïveté and that brightness has gone away. I think I am more focused on keeping my head down and making changes so these things will stop. Yeah, I don’t think I let myself be as happy as I was before, because I’m constantly worried about other ways to support my students or how else I can let my students know that I care. -Beth Pg. 1

Bonnie

- So I think I initially when the public safety officer came over I was kind of shocked and worried that I wasn't going to do the right thing. And then a little bit anxious as to I remember sitting waiting for the public safety officer to come in with the student and I was feeling anxious and worried about her. And then when she was telling the story, I think it brought up – so I had an ex-boyfriend who tried to sexually

- I thought about how because of things that happened at work I'll get irritated with my supervisor, but also with my family and my friends for not understanding what's going on with me, and for not being there in the way I want them to be there for me. And I think it sent me back to some of the times that I dealt with situations and I think whether it's small or big, I definitely bring my work home with
• And so I was trying to like deal with that, but still listen and take notes. I think and really feeling like kind of secluded from like everyone. And I remember feeling particularly at the hospital kind of like I was just in a different place and not really aware of everything, so kind of like in a daze. So maybe still like the shock and feeling guilt or – like for some reason I think also I felt like guilty that this had happened to her. I could have done something to prevent it. And I think that's also where my guilt came from when I was thinking about like I felt like there should have been something I could do after the fact, too. And because wishing that like, because I had experienced something similar, wishing that I could be there for her in a way that I wish someone had been there for me. Bonnie Pg. 9

• Almost immediately when I moved out of my residence life position I felt a lot better. I think there were, like the physical space of living with students and having to deal with all those emotions was really hard on me, and so feeling like I could live somewhere else but still work with students felt a lot better. And I think my sleep right away was a lot better, not living in the residence hall. [Laughter] Bonnie Pg. 16

Clarissa

• I don’t think I’d ever miss something that major. But I think in my head I was always worried that anything I could miss would either lead to the student not getting the support they need that was always my biggest fear. That they wouldn’t get the thing they needed or that would make it worse, and then secondarily that I would do something wrong with my colleagues, or that would require my boss to get pulled into something, and then she’d have to _____ me because her staff member didn’t do something

• irritable, distressed, when I was writing I talked about if it’s a particularly bad thing and I come back from something and my staff is like, “I just have a quick question,” I can feel that I don’t have the patience I normally would have and it has 0.0 to do with them. But my cup is empty and now I need to try to fill your cup and how do I do that. And even with friends or family too, how was your day? It’s fine. _____ probably I’m going to sound a little annoyed and _______. I do
right. So I think those were the things I was most worried about. -Clarissa Pg. 2

- I mean, I got training – they didn’t just put me to it. I did get training. But I am so not for this. This is not a good idea, how can they trust me? So yeah, that was a lot more – I mean, more serious things, right? But it also just felt like how on earth can they think I will know what to do, even though they gave me all the training and the _____ know what to do. - Clarissa Pg. 3

- Much less patience and I usually pride myself on being very patient. Especially when it comes to – you know, I think sometimes staff sometimes you’re working with students, and you’re like, oh my gosh, I already told them this. Yeah, but a quarter of our population is new, so you’re gonna have to say the same stuff, they’re new so we need to always make sure that we’re sharing that information and that we’re consistent. And this is the first semester that I felt like I didn’t have as much patience for that as I have historically. So that is frustrating to me. I like to think I’m very good at that but also try to be a good reminder to colleagues that maybe it is a good strength for them. But I know I wasn’t able to do that as well as I have and I was at other institutions as I have been I the past. I think my capacity for sympathy for certain things was – or empathy – both – was reduced because I just thought, do you realize what we are dealing with this semester? I understand that you would like to do this thing or that thing. But it’s not that important. But again, you can’t talk about that and you don’t have that understanding nor should they. Trying to bring those things in on myself and tell myself that I don’t need to share those things, I am dealing with it, but that doesn’t impact them. But someone comes in upset because
they can’t have a certain vendor because it doesn’t have _________. Yup – sorry, those are the rules. But again, trying to remember, I need to explain why because I’m good at that and I always do that even though I’m really tired and I don’t have a lot of time this semester because of everything that has happened, I still need to do that. I think that felt more natural in the past where I just did it, whereas now I would have to remind myself, you still need to do that. You need to make time for that, it’s so important to do that because that’s how people learn. It’ll be a little bit of work upfront and a lot less later if they know it. That used to be a lot more natural. This semester I had to really remind myself to do it. So those were the two things that were the most impacted and the most frustrating, because I knew what was happening and I didn’t know how to fix it. - Clarissa Pg. 13

- I don’t know, I feel like personal feelings don’t even matter. Deal with the situation, get information, make sure I have all the stuff that my supervisor will want to know, make sure I have my report backwards and front like double checking the information checkpoints. -Coleman Pg. 4

- that sort of undergirds a lot of like handling crises. we weren’t really trained like in the

- It’s just sort of trial by fire, and if you step in the wrong place, you get chewed out. Coleman Pg. 11
higher ed program on you know, you have this type of incident happening, how do you maintain your cool, what’s the proper way to maintain your hierarchy with it, it was more of like, if you’re gonna be in that job, the assistancehip is most likely going to train you in that way. Student support yeah. Crisis management – we had like case studies. But it wasn’t instantaneous crisis handling that we talked about directly. Like you know, there was probably a case or two where we talked about some far reaching identity based campus issue that needed a quick response, like a social media response and a policy based decision. But those aren’t things that me on the ground as a pseudo-entry level professional has influence over. Another thing, supporting students tangibly came with challenging our assumption in terms of like where students are coming from with different issues. -Coleman Pg. 9

- It depends because I feel like if you asked me at various points of the year, there are going to be times that I'm a lot more cocky than – like that survey over the summer, I'm like, "Tsk, secondary trauma? Whatever. Okay. No, no, no, no." And now that it's October and I start thinking about this stuff, I'm like, "Oh. This stuff is real. I am having trouble sleeping at night."And like I went into the office on Saturday because I couldn't get this particular case off my mind. And so I was
like, "I'm going to go in and do this and send out these letters that I need to send," and then you feel a little bit better. And I'm like, "All right. Now I have Sunday." And it shouldn't be like that. You shouldn't have to go. You shouldn't have to do work to kind of scratch this itch to make sure that you alleviate the stress. And so, again, ebb and flow of the work, that's how it kind of happens in the fall. -Elizabeth Pg. 15

- sometimes I'll stay up past when I know that I should go to sleep because I'm like I know when I go to bed that I'm going to have to wake up and go to work in the morning. So if I stay up a little longer and just enjoy a little bit more of this show, it's more pleasurable than having to worry about going to work in the morning. If that makes sense. Elizabeth Pg. 17

- But ironically since I made this drawing and since I began this study I feel like when, closer to the beginning of this study, especially when I filled out, I think, that first initial survey, it was kind of at the tail end of the summer, beginning of the fall when things hadn't gotten into the full swing of things yet or there weren't quite as many cases yet. And so now that we're in the thick of it in the fall, as I'm looking at this picture it's kind of misleading because this makes it look like, "Oh, once I'm at work, all my cares go away
and I'm going to ride my bike, and I'm going to sleep, and I'm happy, and I'm petting the cat." But in reality, now that it is like crazy stressful, I'm out riding my bike and I'm thinking about shit at work. And I have a hard time sleeping because I'm like, "Oh. I shouldn't have put that in that e-mail." Or, "I forgot to feed the cat." [Laughter] So it's like I guess it's not quite as carefree as the picture might depict. -Elizabeth pg. 7

- There's definitely a satisfaction, like because I'm in student conduct and in conduct you definitely get to work your brain. So it makes you think. It challenges you. I'm the type of person, I kind of thrive on chaos, and my personal life used to be a lot more chaotic. But now since I work in conduct I feel like I've transferred all my need for chaos into my job. And so I'm able to manage that really well. And so what that has allowed for is for me to have a relatively calm personal life. So not a lot of drama. You cut the bad relationships out of your life and you're able to have stronger interpersonal relationships with your family and friends. So I find that it's really a good balance. I don't think that a job like this is for everybody. You have to, I don't know, you have to be able to deal with it, I guess. So, hard question. -Elizabeth Pg. 2
• I've gotten better at asking for follow-up help afterwards. I've gotten better at recognizing like, "Oh, this is going to be a thing that's going to sit with me for a bit." Because I am better at doing that now, I can prep myself mentally for it, and start making preparations, if that makes sense. I feel like – I don't know. It's this complicated thing where it can be really painful and it hurts. It can really undo a lot of my understanding of myself, and leave me feeling really disempowered, and at the same time, doing this kind of work helps me heal in a lot of ways, and it helps me feel like I'm being active in supporting students through some of the things that I've been through. -Jane Pg. 10

• This work that we do is really difficult, and puts us in really compromising and uncomfortable positions. Jane Pg. 8

• I don't feel like that happens, and then I thought, "Oh, wait, no, I alienate myself from others," especially if I'm in the recovery mode after something like this. I push away a little bit. I'm less engaged if I'm not taking care of myself. I'm not the bubbly – I don't think I'd call myself bubbly [chuckles] – but I'm not the energized, social self I am sometimes after a really rough on-call week. That one took me a while to think about it other way around, like flipping the switch almost. Jane Pg. 4

Jane

• "Am I really better?" I think I've done a lot for my own understanding of my own sexuality, and how I want to experience sex, and how feminism has really helped me in that. Really understanding race, to me, has also helped me a lot in that, but I had that moment of doubt, that I think, after that incident, that like, "I don't know if I'm actually better." I don't know if I'm engaging with people the way I am because I'm still broken, which I think that's what it came back to. Am I still broken, or did I figure it out, and I'm just naturally second-guessing myself, or am I just like, "Oh, it's slowing coming off, like this façade that I'm still – I'm better from that one incident is now finally diminishing, and now, I have to figure out how to put it back together."? I feel like I'm scrambling my words a
lot. Damn [chuckles], yeah, I don't know. I think a lot of that incident brought me backwards a little bit, and so for a couple months, it got me to go back to the therapist again, and try to start medication again, because I can feel myself slipping back again. I have really terrible follow-through, so I only went to a therapist four times and took my medication for probably a week straight. Jane Pg. 9

- I think the process of actually composing the image itself, was actually therapeutic in many different regards of my own identity. Although this is, to me, telling the story of what happens after I'm on-call, and how I'm feeling, especially after dealing with a pretty heavy incident, it also had a lot of empowerment for me, so being about honoring my body in this experience, and doing that self-portrait, just made it seem like, "Yes, the things that I have gone through have been really hard, but I can make it pretty." I don't know. That was a really important discovery for me recently, that that's possible, that I think it a very important process, and it's not the end of the world at the moment. Yeah, that's kind of what happened there. Jane Page 6.

Jose

- Notoriously I try to work through things, I just try to continue as if normal and ____ so I tried to get through my normal day when I heard the news of that student. And then this student’s situation popped into my mind,
which I realized as soon as I got out, like, “Wow, that was exhausting and I should not have done that.” But after that I called up that RD, they don’t work there anymore but I called up that RD and talked out how I was feeling that day. And all those anxieties and doubts that would pop up with a situation like that. -Jose Pg. 7

Krista

• it's really frustrating. I felt really helpless. I felt that everything that I would do was limited by the student's desire to be helped or even the comprehension that things could get better. I think that the young woman, the last young woman, her parents were really super involved, but also in denial of like, “Our sweet perfect 18-year-old can't X, Y, and Z.” And so it was like, “No, no, no, our baby's just fine.” “Well, no, your baby is dead now,” so that's how that works because you don't wanna listen to people that actually have some experience – -Krista. Pg. 6

• I mean, to be completely honest, I self-medicated, and I self-medicated a lot over the next while – I mean, a while. And so I was abusing alcohol, which then created my own sort of issues in life, from a general sense, as one might imagine. -Krista Pg. 7

• Just like resentment toward people that were in the positions and resentment at the, I think, at the program at that institution, for a little while, of like – you know, it goes from the top. When you have – I don't know what his title is now, but – an executive associate, vice chancellor, whatever the hell he is, to cut positions to where you don't have enough staff power to pay attention to the student needs, then this is the result. This is the result when people don't have enough bandwidth in their day to actually take the time to care about students. Which I think – so I was pretty resentful of the fact that those changes, which were monetary in nature – they were driven by the bottom line and the dollar –
affected this person because I really do think that a lot of it was because the folks that I left the information with had so much going on, they didn't have the time to sift through the details and to hold this one student in their minds because there was all these other things, right? -Krista Pg. 4

- When I'm thinking about just the big incidents, I think about guilt a lot, about not being able to do more, being able to only do what I can or, you know, only what I'm actually able to do. So the situation that has most – that I'm reflecting on most is a situation where I was working with a first-year student who was a lot of problems, and he was doing a lot of drugs and was having some really negative behavior in the community. And I met with him in a judicial context, in addition to just being a part of the community, and trying to get him connected, connected, connected because I knew there was an underlying issue. And I actually left the university where I was working and I said, “Somebody needs to keep an eye on this person because there's something going on. This is a deeper issue.” And he ended up jumping out of one of the windows in the residence halls and committing suicide - Krista, Pg. 1
Like I know that I can go into a pretty cruddy situation. I've seen a lot of stuff from housing whether it be blood, fire. I mean, you know, these – talking to people that have gone through a traumatic experience of either sexual assault or just coming to get me that their friend isn't responsive. I know that I have that resilience. It's unquestioned. If I didn't, I wouldn't be here. I would even be here talking about it, being able to talk about it. -Luke Pg. 18

So I think part of that meaning maybe is knowing that I am resilient. That I can handle these really tense situations and I think the piece that's really fallen into place for me over these past few months since started my new job is just because I did that all the time doesn't mean I need to.

And I think that was part of it. I was not confident in myself and like, wow. I don't know. I don't have a ton of confidence in how I handled this. I handled it to the best of my ability, but I'm not really sure if that's what people wanted. I think now that I look back on it, I really needed time to myself before I started talking about it, but I wanted to process it, but I just wasn't ready.

Luke Pg. 3

The Captain America image that is warped to hell the lack of a better word because that's what it felt like. Like you came in like you thought you were going to be this shining person to help everybody and it didn't. As soon as you make contact with this gooeyness, the incident, it just – it fades away. It was still there. Like you can still see a shadow of him, but is not what you picture. In turn, I would find myself hardening like this knight I digitized in the center which – it's supposed to be this bastion of just like, yes, I want to help with your trauma, but this is all I can give you. You've got this really cool water shield and I wanted to go with earth tones for the type of – you know, just a feeling of familiarity. It's not a great shield though. You can kind of see it kind of falling apart at the top. It's kind of fading away, but it's something and is not even really protecting everything. There's like this huge glob coming in from the bottom left like, well, that's going to touch you. You can't really do anything about it, but I guess that was just – that was how I was feeling during some of those incidences that there were these two sides of me that were present, but one was morphed and chipped away very, very fast. What emerged was this kind of hardened stone person of just like, okay. This is what we need to do. I know this terrible thing happened. I'm here to make sure these
processes are followed and that you try to get justice. -Luke Pg. 13

- I think that's why, not so subtly, I chose a knight for the centerpiece of it, but that was kind of my thinking in those incidences and trying to block – you know, trying to block some those things that happened. So, while it's not the most subtle piece, that was kind of all the thinking that went into making it.

- So I think I was sleep deprived which made me grumpy and then I think how people acted had still rubbed off on me and I think I was still – frankly, I think I was still thinking about the incident and still walking myself through it. Like it was just – it was like stuck to my brain. I think was the only way I can describe it. It was like the gooey sticky substance to my brain and I couldn't get out of that mode. I couldn't stop thinking about everything that intersected with that incident. The other part was was I handling it correctly? Was I going to get a _____? Was I going to get a phone call from my supervisor about how well or how well or not well I handled the incident? Because it was a high-profile athlete that it was going to be in our school newspaper if not the local city paper. - Luke Pg. 2
• So, I think sometimes I feel a little bit of guilt for not knowing what to say or not being able to be really comforting. I don't know that I have a comforting presence for folks as they are talking about these things, but I don't know how to change that while still protecting my well-being as somebody who is a live-in professional...I kind of – I know that as a person I feel a lot of responsibility for things that aren't my fault or I just think that I have to do everything right all the time I guess. -Margaret Pg. 6

• some of these little dots all over it are like these big facets of students getting ground up by the system, the system we believe in, the role of money, and I would say the system doesn't appropriately value the emotional, mental, physical academic strains that financial stresses place on a student, so that's contaminating everything. Then there are these other demands of the job and there's never enough time. It's making sleep hard, and making life hard, and puts the other facets of my life in this very secondary or tertiary priority. So that's kind of the drawing. Matt Pg. 5
Rachel

- I was trying to go to sleep and I just couldn’t. All of the things that just happened were kind of like replaying in my head and just all those emotions, like feeling bad about the situation, like feeling really bad for the students that were involved, my emotions just felt really heavy. Then even like the next couple of days and stuff, it was like more on my mind.

Ramon

- I think that type of connection with these families can be profound, and it seems to be meaningful to them, which is great. I can't ask for more than that. So, that's an area of – I keep thinking burden, and I don't want that to sound negative – you are potentially carrying the weight, or it feels like sometimes you are carrying the weight of how they experience the university in the wake of the loss of the student.

Reilly

- And I got some training on the fly, but, even in the time that I spent working for the center, I never got to a place where I was confident in my support abilities. And so the red is “I'm panicked when I'm in a place of having to support someone. I am certain I am harming them more than helping them. I don't think I'm doing right by them.”
Scarlett

I think a lot of it was the burden that I felt also knowing that I was part of that system, and that I also operated in it. I think I probably overcompensated, because of that burden, to help this student because it was just so awful. Having to sit with her through literally an entire day of her hearing was just such an immense burden. Scarlet pg 4

But I really believe that we are traumatized on a daily basis in this field. We hear gruesome stories of life, and then on top of that we have a shitty supervisor. It's like "what," and we have to deal with university politics. We don't give people space to be human. Scarlet pg 15

Segunda

There were times where I felt that there was nothing I could say that would help them even feel better. It felt like they saw through all the bullshit because they were just very jaded about everything because of all the frustration that they had gone through. Segunda Pg. 6

Therese

Then, worried that I may not be giving them everything they need to make the kinds of changes they wanted to make. Like somehow I would let them down, I would be more liberal and not radical enough, not forward-thinking enough, not be able to help them make, maybe,

I don't think I realized that I was experiencing some sort of burnout. I know what I was feeling then and I know what I feel about it now, and they are very different things. So at the time I just felt like: "I am doing this really great thing, I live for the summer. I feel sort of alienated and frustrated with my
the kind of change they wanted to make. Therese workers during the year. The summer gives me the opportunity to prepare students to deal with the same sorts of frustrations and do the same sorts of work I'm doing," and then looking for a job because I had outgrown it. But really I think what I was feeling was a lot of burnout. I am not sure if I could keep going at that pace. Therese
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<th>Theme 5: Importance of personal and professional support networks.</th>
<th>Theme 6: Personal impact of professional’s relationship with student(s) in crisis</th>
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<td>Angie</td>
<td>• “I don’t take a lot of time to stop and reflect and then that’s just ‘cause I personally don’t see it as beneficial. Often I think that many times when you stop to reflect and you spend so much time in that that can lead you back to like feeling that and like not being able to, I guess, function really well in your life, so I don’t take time often to sit back and reflect so I think it was very interesting to do that ‘cause that’s just not characteristically my personality.” - Angie</td>
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<td>Bernadette</td>
<td>• I assume there’s gonna be a crisis at work at some point because I work partially in sexual assault and partially in LGBT stuff, there is not a question. And that evens me out, and so I think that when you talk to counselors or you talk to social workers, that’s assumed that that’s what they’re doing. And we don’t do that in student affairs. We don’t talk about self-care and we don’t talk about counseling and we don’t talk about that assumption to keep yourself healthy. - Bernadette Pg. 6</td>
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<td>• Sometimes I think there are differences of how different parts of student affairs deal with trauma and so I think sometimes I feel lucky</td>
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<td>• I think it becomes a little bit more personal. I think you feel it more a little bit towards you. But then I think also for me one of the big conscious things was I have an outside lesbian trivia group that we go out and play bar trivia. And it’s the support, non-work, random lesbians in the area. And so I think that for me that’s been very intentional that I can’t be just around queer people who work in the University. And so I think that’s really important and I think being in a big city, that really allows me to do that, whereas sometimes smaller cities you wouldn’t be able to. - Berndette p. 7</td>
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being in a woman’s LGBT center because – and I’ve primarily come up through women’s centers – that there is this understandability that there will be trauma. And I think ___ a lot of times they have all this experience but they don’t talk about it, and I don’t think it’s thought of as a trauma as much. Whereas if you’re doing sexual assault stuff, it’s assumed you’ll have trauma. So, I thought there might be something about that. Or I think also sometimes if you have the skills then it comes to you. -Bernadette  Pg. 15

- For me I think it is about figuring out how to make sure that I’m whole enough for helping others. So, whether that is going to counseling or going to church or going to the trivia, you have to find the support you have. I think also finding cool people on campus who will keep you sane, I think that’s helpful. When you have a buddy, just to be like “bah” and then they can tell you “bah” when they need to.-Bernadette  Pg. 12

- So, now I have two supervisors I feel like one is better at talking about this stuff than the other. But I think, I don’t know, I think it’s helpful. I had it more in grad school, where we would do a lot of stuff as a team. Yes? Wait one second. So, I think for me there is a – I think when we can talk about it as a group – so when I was in grad school we did a lot more of bring everything together and we would talk about, “Oh, I’m working with this student. Do you have any information about this student?” And we don’t really do that as much here, and I miss that and I think if I had that I wouldn’t be as concerned about going to counseling. But I don’t, and so then you have to figure out how to do it yourself. -Bernadette  Pg. 13
a lot of the students that have opened up to me
I’m extremely close with so it was hard for me
to find the do I act professional and do I act as a
professional or do I need to let them know that
personally they’re still in my thoughts? Finding
that line between friend and friendly. And that
was always difficult for me because I feel like
I’m a very compassionate person. So I don’t
wanna overstep a boundary but at the same time
letting the students know that I genuinely care
and genuinely worry about them, that was
always rough for me. -Beth Pg. 1

So, here at Central, cool, we have an LGBT
center on campus, that doesn’t mean we’re
actually supporting our students who identify
within the community. So, I get frustrated with
the system that’s been built because I don’t think
it’s doing anything. It’s just there and it’s just
there on paper. It’s not serving its purpose. Beth
Pg. 3

I have to say I get support from my parents and I
get support – I’m in a really good place with my
colleagues and my supervisor ‘cause they
understand and they are dealing with the same
things. So, I go out with my colleagues, I hang
out with them, I talk to them. Jenae was in my
office today helping me work through that
feeling of being overwhelmed. So, I have
support from the people who are doing the same
work I’m doing. I think just being around them
and talking through issues and knowing that
they see the same things I see, they’re going through the same things I’m going through. It’s not like I’m alone in the middle of the ocean going through this stuff. I have five other people who are going through it with me. I have them to hold onto if I ever start to drown. Beth Pg. 10

• And then also thinking about community for me and how my environment at work felt safe or didn't feel safe. Because recently I had a student who was talking about committing suicide and my current supervisor was a lot more supportive. And my current coworker was a lot more supportive. And so I think thinking about the environment that I was in, the sense of community is very different in how I handle the stress. Bonnie Pg. 2

• And so no one ever said that to me or my coworkers. So and if people would have said, "Hey. I know you have a job here, and your job is to help students. But if you're an emotional wreck and you can't come into work, then do what you need to do to take care of yourself." That would have gone a long way. But I think it seems like the people who were training me and my coworkers were much more experienced in residence life and so they – and I think I'm a more emotional person. And so I think that it was like, it really impacted me a lot more than it impacted any of them when they had these experiences. Bonnie Pg. 11

• And so we had a student who was an international student and he just was getting sick, and wasn't showing up to things. And so my supervisor actually recommended that she come with me and sit down and talk with him. It's very different than residence life because in residence life you always have those sorts of things. But it felt a lot more supportive to have her come with me and check in to see how I was doing afterwards. So, yeah. Bonnie Pg. 2

• I would go to the counselor and like cry for an hour. My parents – my mom – was kind of supportive, but always with that like, "Don't share with other people how you're struggling with this because you need to be doing a good job at work." So I think it was a lot of like crying to friends and family. I had a really good friend who, she was becoming a doctor as I was working in residence life. And so she had a couple incidents where she had to react in crisis managing way. And so we were able to talk across and be empathetic for each other in that way. So I think that was really helpful to have someone else who actually experienced it
outside of my work and outside of like the student affairs bubble. So, yeah, there was minimal support from my department. I think my supervisor and my supervisor's supervisor were very unemotional in general. And so, like I had mentioned earlier, my supervisor several times incidents would happen to me, and he would just call and like – he wasn't yelling at me, but I took it as yelling at me to get the report done quicker because I was just in such like an emotional place and time to deal with those things. I think it would have been better if people would have like talked more about what was happening. I did have like one coworker who was really supportive. And she was leaving the institution, and she had worked there for a couple of years, and so she was very much like, "Yeah. Your supervisor is not going to be helpful. He was never helpful for me. You just have to kind of accept that." So that started to be a little – like as soon as I realized like, "Okay. I can't depend on him for that," it was a little bit easier.

Chloe

- The word alienation, and I think I meant that in a – like, the reason why it stood out to me, it's not just because students that I support are mainly sexual assault victims, and that is, like, a huge feeling that they may experience. But also in doing the work that I do, sometimes I do feel alienated from my family and friends who are outside of the student affairs work,
'cause they don't really understand what I do, and are always able to provide understanding or support when there's something that's going on at work that I'm struggling with. Chloe Pg. 1

- So in some sense, I feel like I have to defend how I support and how I provide that advocacy to my students, cause I am not someone who forces somebody to do something that they don't want to do. And so I'm continually having to educate people outside of my – outside of the field, to help them understand, and they can just get exhausted sometimes and feeling alienated, and I'm like, am I the only one? And I know that's irrational and I know there are people out there who do the work, and I find those people who I can go to, but when it's my own family or people that I consider, like, really close friends who are like family, it can get really exhausting, 'cause it's a repetitive thing I have to do. Chloe Pg. 2

- I usually go to my supervisor to _____, and I would let her know how I'm doing. I mean, it's a little different this time, because my supervisor was so new, so I was still in the process of getting to know her, especially at this time. This was probably, like, a couple weeks in. [Laughs] And so I – one of the other advocates that I had who volunteers is a close friend of mine, and so I turned to him a lot to help process it, knowing that it would stay
between us and he didn't know any of the person's details or anything like that, so I'd go to him. And in the past, when I was a student advocate, I would go to the program coordinator and turn to her if I needed to process what happened, things like that. Chloe

I think one thing that I’m very thankful for at this school is that they understand that sometimes you literally need sleep because you were up all night, so it’s not necessarily always from a traumatic thing but if you’re managing something that you need some time, I appreciate very much that they give us that space and say, all right, if you were up until 3:00 AM and you don’t come in until noon, that’s okay. As long as you get your work done and you manage it, that’s fine. As far as processing stuff, it’s definitely something that we talked about and that our supervisors and campus coordinators talked about the importance of, but it hasn’t done anything that now that you’ve done this you should do this. -Clarissa

It’s really up to us how we should manage it. And I think a lot of us feel torn because much of it is confidential. So how do you process something like that, when you can’t really get into it. Especially our community is very small so even – not everything is known but often students know when something is happening. So trying to keep that – it’s not like we pretend that it doesn’t happen, but we have to be careful because we don’t want to, nor can we, nor should we share certain things. Or so I think people just sometimes are like, “Oh it’s fine, I’ll be okay, I’ll be fine.” And also I can’t really talk about it anyway. -Clarissa

So I think that trauma can be all shapes and sizes and you know, levels of seriousness or ______ or not. But I am – I guess I – as I kind of alluded to before – I am surprised when I really stop to think about how much of that we do have in our jobs, that we don’t really talk about before we’re in them. So whether it’s grad school or just talking about our fields in general, talking about it at conferences. I just
• We don’t share everything that happens with our students with everybody, that wouldn’t be appropriate at all. I know there are other things that I have either only heard about peripherally or know nothing about but I’m sure are happening. And then all the things that happen that we never hear about. So it did make me think about, I just chose a couple of things that were very impactful but that there is so much more. And that we got into this – or I got into this work to support students, but I didn’t think it would be like this. -Clarissa Pg. 14

• I don’t think that we necessarily give ourselves that credit for how much we do and how much we need trophies and awards, because no, it is a part of what we do and acknowledging that and we’re empathetic people and we’re here to support people so of course we’re gonna do that and we’re really good at it. I don’t know – I guess we are, I think we are. But are we better, could we train ourselves more? Could we debrief more and better? I think those are definitely things that our field should be thinking about. -Clarissa Pg. 18

Coleman

• do no harm doesn’t mean don’t harm people, it’s like help remove people from harm. Like that’s our job. And like granted, that’s like student affairs 101, classroom day 101. Coleman Pg. 9

• I feel like if I need like an outlet like I’ll go book a counselor or therapist or something. Which I did do last year for a couple of things, but I haven’t this year. I don’t know, it’s not necessarily my supervisors coming to me and saying, “How can I support you?” Because that’s just not the style of this department. But I don’t know, I think it’s more of a you know – if you are up really, really late handling an incident, like until 5:00 or something – it’s like okay, don’t come in until noon. That sort of

• And then my words at the bottom were just like, okay, maintain focus, it’s gonna be okay because you’ve gotta get the people, gotta get them help, and focus on the protocol because I don’t want to get chewed out by my boss. -Coleman Pg. 3

• But we had a significantly stronger level of training in terms of who to call and having like a secondary professional every weekend with you if you needed help and the RAs were pretty much trained on alcohol incidents because the whole campus was a raging party every Friday/Saturday – which is not necessarily the best thing, but the RAs were like also very good at like doing the secondary crowd control with you. So when I had a
thing. I see that as a form of support. Coleman
Pg. 10
couple people who needed to go to the hospital – because there’s having too much alcohol and we’re gonna send you to the hospital, and the alcohol poisoning, the student EMTs who are responding to you think you might die – terribleness. I think it’s more a reflection on the process that the college or the university has, and how we’re supposed to handle it. They’re supposed to be able to apply to prepare you for any type of incident. Last year if they reach some threshold in your brain of not being safe – hospital. Whereas here, it’s like we send a RA – like a CA – to the hospital with them. So I think there’s an extra level of I want to be making sure that I’m not wasting everybody’s time for four hours. But even so, if it’s over your head you’re either making a call or you’re sending them to the hospital and then you’re making a call right away. I think that’s been ingrained in my head. Even since being an RA – if you ever feel unsafe, you’re a staff member, if you feel unsafe, you better be calling 911 or campus police. -Coleman Pg. 9

Elizabeth

- So it's just kind of like you at work begin that stoic discussor of information. And yeah, you laugh, or you get upset, and all that stuff happens at work, but by and large you have to be pretty, again, professional. _Elizabeth Pg. 8

- especially when you're in such a serious field – it's rare that you can show students or parents or

- My partner, he does a great job of indulging all my talking and venting and all that kind of stuff. So then you feel stressed about, you're like, "Oh, man. Well, I'm just griping about work again," with him. So this was kind of nice. -Elizabeth pg. 19
clients that side of yourself because it's not professional. So you have to be professional at work, and then you're able to come home and just kind of like be, just be you and not care, and just breathe. So that's good. -Elizabeth Pg. 2

• But then having that RD in that building, since that building is kind of far away – so at the school that I was at, there's two RDs on-call, so one is a primary, one's a secondary, and the other – the secondary RD on-call was someone – was the RD of the building that I was helping the student in late at night. I called that secondary RD on-call after I was done talking to the student, and they knew that I was doing that. They just offered that I can come upstairs and hang out with their cats for a bit afterwards, and they just sat with me. Their partner was asleep, and I was really worried I'd wake their partner up. Jane Pg. 2

• I just, for a while, didn't have anything to say, other than – I make stupid jokes when I'm really uncomfortable or processing, and they entertained that. They knew that that's – I guess they knew that that would happen. They kept being like – they kept validating it, and even though they didn't feel like they can empathize, but sympathize what was going on for me, and was also just willing to talk about things that wasn't that. And so, I was able to stay with them, and this was at 4:00 AM, the time I was
feeling comfortable to go back home and no longer feeling really guilty about what happened, and trusting that the process, or whatever happens for that student, will be the best thing for that student.

...it’s like, “All right, in your little tiny bit of free time, try to fit it in.” And you’re expected to maximize it where it’s just not realistic. Jose Pg. 9

To be frank it sucked. [Laughs] Because the feelings of not being able to actually help in a situation where you have had all this, ___ how to describe this, experience with from start to finish, and then just stop and then pass it off to another member of the staff. That was very hard to deal with because I felt like, okay, you don’t have the actual situational experience I just dealt with and the nuances of that situation. You only have what was put in the report, and I tried to be as detailed as possible but you’re not gonna get all those things off of words on a paper. Jose Pg. 7

It’s hard to describe but we became very good friends. The thing is it started with I respected her opinion a lot ‘cause a big thing with me is that I always thought I wanna emulate people that I think are doing a good job, and that’s where that started. And then this individual would always give advice but it wasn’t the condescending advice. It wasn’t like, “Oh, you should do this.” It was like, “Here’s another way to look at.” So that was part of that, and honestly it was just a good venting ___ vent to each other, just to let out some of the tensions that would come up from working in this staff. So, once all that came together I knew this was a person I could go to. I respected them, I could be honest and frank with them, and they could do the same for me. Jose Pg. 2

I think one of the things that's really hard for my resident director staff and some of us is that they often know the students. So where as at the VP level you usually don't. You don't know them that well. So, you can separate out your
sadness. You're not grieving yourself in the same way. That's, I think, really hard for staff and you have to watch out for that. Leslie Pg. 15

- trying to be rough-and-tumble and deal with it and still having doubts of, "Wow. I'm really alone in this. I don't really – I don't – you know, this thing happened to me and I can tell people about it, but they didn't live it." I think the reason it relates the least is because I do know that my fellow residence directors did go through similar things and while they may not be to relate directly, I could swing all the terms of policy and everything else to them and they would get it. They would also get it on a student affairs level and they would get it from an emergency response professional perspective. So, I never really felt the alienation. I felt extremely supported with my staff. Luke

- irritable I wrote lack of support from others. I think that's like this – my grad – my under – yeah, like grad experience and really like my undergrad experience as an RA and dealing with these kind of incidents where like they still happen, but I don't know. I felt more supported in some ways. -Margaret Pg. 4
I wasn't on call or anything and like right after that, one of my supervisors had emailed me and had said like, "We need to meet to talk about your email communication because it's like you don't have greetings at the beginnings of all your emails and that's unprofessional." Like some crap like that. Margaret Pg. 4

Like here, I feel like I will have multiple Title IX incidents happen in a week on call and people are just like, "Oh, are you okay?" Then, five minutes later like back to business. It's like get this paper in. So I think like I connected that with irritable if I think about my own irritable this after handling stuff and not getting a lot of support from colleagues or other folks understanding what that might feel like to respond to those incidents and the amount of time I think you can take to kind of return to normal. If that makes sense.

Coworkers- That's so – that's like one tiny aspect of what it is. If we don't have the freedom to talk to each other and take care of each other, it's not going to get anywhere. My investigator is very likely to beat herself up if she feels like she missed something, or a detail, or working with a victim and they're struggling to get out of a violent relationship, and we do one thing, and they take it not the way we expected it, and we lose them. Monica pg 29
Ramon

- I think in some ways it is – when my associate dean and I have often talk about that people feel bad for us or they feel sorry for us, like "your week must be really difficult," or "your week must be pretty stuff" there is something about that that is fine. But the other part of it is like this is our daily bread, this is our work, this is what we do. No one is putting a gun to our heads to say you have to do this role, we signed up for this, we continue in this work. That is an interesting – I think the alienation piece for students is really significant. But I see that even in myself as a person who works with students who experience trauma. Ramon pg. 3

Scarlett

- Yeah, it's very difficult. Not only the idea of supporting students, but I was also bullied for years in this role. I think that is also compounded by things because there is a lot of second guessing. Like when this person left I kind of had that Stockholm Syndrome of can I really leave the gate, is it really safe for me, can I actually walk outside.I think it has really affected my career trajectory and it has affected my well-being for sure. Scarlet pg. 3

Tanner

- We had conversations with him. He was supposed to meet with even higher up people, but that never actually happened because they tend to drop the ball a lot here. So it's trying to
find ways to support them and making sure that they feel justice is served, even though it's not really getting served sometimes I think. Tanner pg. 9

- So the first thing that comes to mind is something I've heard at my current institution is that people in residence life feel like – so people in upper level administration in residence life feel – that people on the lower level need to do their time. So they kind of like expect the entry-level professionals to deal with all the incidents and act like they [are fine]. Tanner

- I think because you're dealing with so many sensitive issues that are happening, there's only so many people you can turn to. I think the general rule of thumb is the people in res life are the people that know what's going through with you. I try talking to my parents or my grandparents, like, "This is what my job is." They just don't understand it. Tanner pg 13

Veronica

- Tell me, am I a shallow person if I don't think I really dwell on stuff that much? I think I am pretty lucky to have a fabulous husband and I can come home and talk over things with him. He always gives good insight, too, like, "Oh yeah, you handled that well," or "Have you asked them about this" or whatever. So, I don't hang onto stuff. Veronica pg 12
Relevant Co-Researcher Quotes Supporting Themes 7

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<th>Participant</th>
<th>Theme 7: The negative impact of support-work on personal wellness</th>
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| Bernadette  | • I think it doesn’t really – I don’t know if it affects me. It affects me differently so I don’t always show the effects. So, I might be feeling all kinds of ways but I look not like I’m feeling all kinds of ways. A rabbi at our school only responds in Facebook messages. That was __ __. But so I think for me it’s a fairly recent diagnosis so I’m still trying to figure out what that means. But dyslexia and disability is an important part and so because I put myself a lot to my students then they put themselves to me. And so then I have a little bit more I think mental health stuff than a lot of people see because they feel comfortable saying, “Oh, did you know that your picture is moving?” for instance, and I’m just like, “Oh, okay, my picture is moving. Okay.” And then I can just calmly get them to whatever support, whereas I think a lot of people if you told them their picture was moving would really freak out I think. So, also just I used to work in disability services so sometimes for me I see a lot of connection with the trauma they’re feeling into disability realm. So, usually we catch the disability first, so I’m really into, with sexual assault, that you have to ask is this a new symptom or is it an old symptom? So, if they’re having trouble with school, a lot of people assume that if you were sexually assaulted it’s because you were sexually assaulted. But often times it just escalates. They’re already having trouble in school and now they have it more and so it triggers a disability. And so I really try to address that because I know that those are connected. Where a lot of people I think don’t ask those questions -Bernadette Pg. 10

| Beth        | • In some ways talking about what level of trauma you might be experiencing. What does it look like? What are those types of things you might experience? And then the – I think more roleplay-type things, but it really can’t affect – I don’t know. To a certain extent it’s more about having someone to debrief. So I think having those experiences of a good GA and a good supervisor is probably the biggest key.–Bernadette

|             | • That kinda stuff, or having students that aren’t RAs know where I live on campus, that’s a boundary that I’ve put up because I don’t want students knocking on my door in the middle of the night. Or the boundaries that I’ve put up here are mostly for my mental health rather than making sure the students know where that professional line is. ‘Cause I think here, just knowing myself, I can lose myself and lose to that mental-health battle if I’m not putting up those boundaries here. Beth Pg. 2
• Before I even got into affairs I struggled with depression and anxiety, and so I went through years and years of therapy. So there are moments when I see a student going through similar situations and it’s frustrating. So I get angry with myself like, “You have to let this student figure it out. Just because you figured it out doesn’t mean they have any idea how to go from there.” -Beth

• And, you know, and I think there's some behaviors on her, and they're normal behaviors, it's not a judgmental statement, but I think she needed me more than I'm used to with other students, and she confused some of the boundaries that we have at _____. because I'm not a licensed counselor. And so – but she felt like a really strong bond with me, and so she used me for all of the thoughts that were going into her head. She would text me or she would call me late at night, and so it was very frustrating for me, 'cause I specifically chose a career that was not counseling. I wanted a career that was balanced between the preventative and that support and advocacy, and to me, counseling and advocacy are very different things. And so, yeah. Chloe Pg. 4

• And so students had in the past have called me at midnight or called me later in the evening, and it's usually been one time or a one-time occurrence with each of the students, and it's been really brief and they just need something. Something happened in that moment and they needed to talk to somebody, and they needed to – they had a really immediate concern, whatever that concern was. Where I think this student I think has experienced trauma her whole life, and so this was a very unique situation that I think was beyond my – beyond my abilities and capacity as a professional, who needed way more help, but was very resistant to seeking that help. And so she would text me at, like, 10:00, and it was not just an I have a question about this. It was telling me every single thought in her head, that was going through her head, in really explicit detail. And I am used to hearing people tell me their story and tell me what happened to them, but it just was a new experience for a two hour conversation about her telling my every single thought that was through her head, and it was very explicit, very – I understood she was trying to process it with somebody. It was – it became clear to me in that two hour – that specific time period, that I was not the person that she needed to process with, because I could not help her move on, because I would try and she would be resistant in some ways, her, you know, valid reasons or her own – her reasoning behind it. And it became – it got to a point this specific night where I was starting to get emotional about it. I was getting – almost having a breakdown from it, and that's not – I'm usually pretty good at, like, not putting that much emotion in. I mean, I have some emotion, you have to in this work, but I'm good at limiting that emotion, and for some reason, I was not able to limit that emotion that night. And so I finally was able to connect her to counseling, and I talked to the counselor for a few minutes to help process. But she –
'cause it's a small community, I know everybody. We all know each other here, you know? And so – and I was able to connect it with her. And I started feeling – I started – I ended up talking with my supervisor the next day, and she was like, no, you need to put boundaries. Like, there's a difference between providing support to somebody and being – and staying up all night and having to be her lifeline, you know, to get help. And that helped me too with having – giving almost permission for my boss to have boundaries, and this was a new supervisor that I had. So it was – that was helpful. So I started with when she would text me after work hours or when she would text me at 10:00 on a Saturday night, like, I would say, hey, let's schedule you with a counselor, or let's call the counselor on call, trying to get her to start using that on her own, rather than using me as a buffer for that. It was something I was doing a lot. Chloe

Okay. So again, not a lot of context, and also it’s in a public space, and whatever it’s the middle of the night___ kid, here we go. And what ____ incidents – all of them are mine _______. But it was a student I knew very well. So one, I was shocked – because I had no idea, right? That he was in this place. But two, he did not want me to be there. He was horrified and embarrassed that I was the one that responded because we had a relationship and it was like I had found him out. I think was kind of the impression I got. So it was really – it’s a crappy situation regardless, but it was made much worse because he lost it when I showed up and he saw that it was me. He had been – he was quiet and just sitting on the couch and he just started flailing and screaming and crying when he saw it was me and didn’t want to deal with me. And I’m like, “Well, you don’t have an option buddy.” I didn’t say that – but that’s in my head it was like, I’m your person, here we go. It was the first time I had ever dealt with it. So I had that fear like don’t screw up, and then it was a student that I thought I knew really well who was not happy to have me there. And our dean of students had only been here for a couple of months at this point, so I didn’t know him that well and he is a part of that system as well of who needs to be notified. -Clarissa Pg. 7

And then there really is that moment of like, all right, like that's awesome, like I'm so glad that you – there was the feeling of thank you for trusting me to walk you though this process and trust me that I'm not going to judge you for telling me all these detailed graphic sexual things, and thank you for trusting the university. And so many people just don't come forward and so it's really nice to know that that person had that faith in you and that they're like, "Yeah. I want to pursue this, and you made it a little bit more comfortable for me." -Elizabeth Pg. 13
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<td>Jane</td>
<td>That's how I do lay in bed, but also, I think what I was hoping I'd convey was a sense of unease, even though I'm back in what's supposed to be really comfortable space. I still have this phone that I have to hang onto, and answer phone calls when ready, and I'm not necessarily – I'm trying to rest, but I can't rest. I think that's what I was conveying. I thought a lot of about that's the position I end up in a lot, regardless of if I'm experiencing secondary trauma or new trauma. I end up trying to be comfortable again and not finding that comfort. I think that's what I was trying to convey. -Jane Pg. 7</td>
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<td>Krista</td>
<td>There was one RD who reached out to me 'cause they knew that I was involved, and that one person reached out and I was really thankful, but everybody else didn't realize that I had been so closely linked to this because – and then none of the ADs that I had forwarded it to, 'cause they were the ones that I left the information with, and they were just not at all even – had no clue -Krista Pg. 3</td>
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<td>Rachel</td>
<td>Like the trauma is either just happened or they’re just reporting it, and they just need someone to talk about it with or they need someone to give them those resources. I don’t ever really get the whole, you know like after the trauma has happened and like I’ve moved on and there’s the positive part and the healing has happened. Rachel pg. 7</td>
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<td>Ramon</td>
<td>I think of my role, in a lot of ways, as kind of walking alongside that person, not forever, in the labyrinth, but for some period of time that they allow me or that they need me or whatever that is. I'm joining them in that process. Ramon Pg 12</td>
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<td>Rene</td>
<td>Sometimes, they'll email me, but for the traumatic circumstances, it's like you never get closure. For the regular circumstances, you might, but for the traumatic ones, and these strange cases, no, you don't hear. You just have a stressed out or distraught student come in. You give them some resources, you tell them options, and you just have to let them go because you can never tell them fully what to do. Rene pg. 9</td>
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## APPENDIX K

**Quantitative Summary of Co-Researcher Horizons**

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VITA: ROBERT JASON LYNCH
Department of Educational Foundations & Leadership | Higher Education Program
120 Education Building Norfolk, VA 23529

EDUCATION

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Committee: Chris Glass (Chair), Monica Esqueda, and Dan St. John

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Committee: Alyssa Rockenbach (Chair), Paul Umbach, and Audrey Jaeger

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2014

National Council for Community Behavioral Healthcare: Mental Health First Aid Certified  
2013

SUMMARY OF WORK EXPERIENCE

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11/2016-07/2017

Graduate Research & Teaching Assistant, ODU  
08/2015-08/2017

Doctoral Graduate Assistant for Diversity Institute, ODU  
08/2014-07/2015

Resident Director, University of California Berkeley  
07/2012-06/2014

Hall Director, University of Tennessee Knoxville  
07/2011-07/2012

SELECTED PUBLICATIONS


SELECTED AWARDS & HONORS

ODU College of Education Peggy Woofter Hull Graduate Scholarship  
2016

ODU John R. Broderick Diversity Champion Award  
2016

National Conference on Race & Ethnicity in American Higher Education Student Scholar  
2015

Local Government Federal Credit Union Scholarship  
2015

Order of Omega William J. Bryan National Graduate Student Fellowship  
2010

Association of Fraternity & Sorority Advisors Foundation Research Grant  
2010