The Cost Of Caring: An Arts-Based Phenomenological Analysis Of Secondary Traumatic Stress In College Student Affairs

By: R. Jason Lynch and Chris R. Glass

Abstract
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Keywords. secondary trauma, student affairs, well-being, phenomenology, arts-based research
Reports of traumatic experiences faced by college students have increased in recent years, including increased reports of severe mental health episodes (Locke & Stauffer, 2015), sexual violence (Rape, Abuse, & Incest National Network, 2016), hate crimes (U.S. Department of Education, 2016), and housing insecurity (Sackett, 2015). Student affairs professionals are often called on to act in trauma support capacities due to their day-to-day proximity to students on campuses with resource-strapped counseling centers (Lynch & Glass, 2018). Reynolds (2010) underscored this trend, stating, “Student affairs professionals are frequently placed in the roles of helpers, and many students rely on them for compassion, support, and guidance” (p. 410). Silverman and Glick (2010) and Lynch & Glass (2018) reported several common crises college students may experience, including the loss of loved ones; suicidal ideation and behavior; anxiety, depression, and psychosis; domestic and sexual violence; natural disasters; hate crimes and bias related incidents; substance abuse; and, severe economic hardships. Unfortunately, colleges and universities often find themselves underprepared to support students who have experienced these traumatic life events (Barreira & Snider, 2010; Kay, 2010).

Student affairs professionals, who may not be licensed mental health professionals, are frequently called upon to act as first-responders, or continued support systems, to students in crisis (Reynolds, 2010). This type of response may include a resident director responding to students experiencing suicidal ideation (Borges, Crum, Kenney, Neif, & Walter, 2008), an academic advisor helping students experiencing homelessness find resources (Diamond & Stebleton, 2017), or a gender equity staff member offering support for students who have experienced sexual assault (Dills, Fowler, & Payne, 2016). Scholars in other helping professions have described the potential negative impact to the personal health of those engaging in professional support of traumatized individuals (Barnes, 2013; Cieslak et al., 2014; Hensel, Ruiz, Finney, & Dewa, 2015). To date, there has been little empirical investigation of the impact of trauma support work on college student affairs professionals’ well-being. Existing empirical investigations of student affairs professionals’ support work do so through the concepts of burnout (Brewer & Clippard, 2002; Guthrie, Woods, Cusker, & Gregory, 2005; Howard-Hamilton, Palmer, Johnson, & Kicklighter, 1998; Sandeen & Barr, 2009) and compassion fatigue (Hoy, 2014; Stoves, 2014), but neither of these concepts consider the impact of repeated exposure to traumatized individuals’ on personal and professional well-being. Empirical investigations of other helping professionals, such as counselors and social workers, have identified secondary traumatic stress, or vicarious trauma, as a potential outcome of trauma support work (Newell & MacNeil, 2010). In the present study, I sought to understand and describe the nature of secondary trauma in student affairs work within a sample of U.S. college student affairs professionals by using phenomeno-
logical methods outlined in Moustakas (1994) supported by the use of an art-based research (Rolling, 2013) visual representation exercise. Through the use of visual art-based research, I was able to elicit a more nuanced portrait of professional experiences of secondary trauma in student affairs, as well as allow co-researchers to express themselves using an alternative medium for communication.

The nature and boundaries of traumatic stress have been a point of debate since the notion of psychological trauma was codified in the third edition of the Diagnostic & Statistical Manual for Mental Disorders in 1988 (American Psychiatric Association, 1988). From a diagnostic perspective, traumatic events may include those involving physical or threatened violence, natural or manmade disasters, sexual abuse, domestic violence, or observed threat or physical injury (American Psychiatric Association, 2013). For many scholars, this perspective is overly restrictive and may not consider a number of life experiences that have real traumatic impacts (May & Wisco, 2016; Myhra & Wieling, 2014). Taking into account the diversity of crises that U.S. college students report, trauma is defined in this study 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” (Pearlman & Saakvitne, 1995, p. 60). Additionally, while definitions of the term well-being vary, for the purposes of this study, well-being may be thought of as the positive self-report of physical, emotional, cognitive, and social welfare (Health Related Quality of Life, 2016).

In order to explore the nature of secondary traumatic stress in student affairs work, I sought to answer three questions: How does secondary traumatic stress manifest in U.S. college student affairs professionals who have given professional support to students who have experienced trauma? How do U.S. college student affairs professionals describe the impact of trauma support work on their personal and professional well-being? How do U.S. college student affairs professionals, who have given professional support to students who have experienced trauma, make meaning of the trauma their students experience?

**Secondary Traumatic Stress**

One way to understand the concept of psychological trauma is to use Lipskey & Burke (2009)’s metaphor of a stone thrown into a pond. The stone may represent a traumatic event, with the first ripple representing the primary victim, and subsequent ripples representing those connected to the trauma victim. The personal impact of the traumatic event then depends on the proximity to the event and intensity of the experience (May & Wisco, 2016). Using this metaphor, secondary trauma may be viewed as the
second ripple, closest to the primary trauma victim. Figley (1999) describes secondary trauma as, “…the stress resulting from helping or wanting to help a traumatized or suffering person” (p. 10). Although not mentioned explicitly as secondary trauma, the DSM-V provides diagnostic criteria, under the classification for post-traumatic stress disorder (PTSD), for secondary trauma stating that individuals must exhibit symptoms as a result of repeated exposure to traumatized individuals through their occupation (American Psychiatric Association, 2013). For example, someone who is repeatedly exposed to human trauma through viewing television news outlets may not qualify for diagnosis, yet a reporter who repeatedly covers stories of human trauma may qualify.

Scholars in other professional helping fields, such as counseling and social work, have explored factors that exacerbate or mitigate the development of secondary trauma. For example, Hensel et al. (2015) demonstrated positive correlations between secondary trauma and a variety of job-related factors in licensed therapists including large client to therapist ratios, previous personal experience of a trauma. They also demonstrated negative correlations between secondary trauma and levels of social support. Additionally, empathetic personalities (Crumpei & Dafinoiu, 2012), and self-efficacy in regard to supporting traumatized individuals (Bride, Robinson, Yegidis, & Figley, 2004; Cieslak et al, 2014), were found to impact the development of secondary trauma in medical professionals and behavioral health staff.

The impact of secondary traumatic stress can be severe and debilitating. Using DSM-V criteria, trauma-related mental health disorders can impact an individual’s cognitive functioning, lead to increased levels of anxiety, decreased social interactions, and negative impacts on occupational performance (American Psychiatric Association, 2013). Common symptoms found in K-12 educators included changes in behavior, lack of concentration, and existential questioning (Hydon, 2015). A number of studies have explored the impact of secondary trauma in social workers, teachers, counselors, and other professional helpers, but few studies on this topic have been conducted with student affairs professionals.

Although the phenomenon of secondary traumatic stress has been well-documented in a number of helping professions, the majority of studies focus on the quantitative measurement of symptoms (Bride et al., 2004; Lynch & Glass, 2018), catalyzing factors (Crumpei & Dafinoiu, 2012), and inhibiting factors (Cieslak et al, 2014) associated with secondary trauma. Other studies describe interventions to prevent or lessen the impact of secondary trauma (Bober & Regehr, 2005; Hydon, 2015; Newell & Nelson-Gardell, 2014). To date, the literature reflects a gap in understanding of the lived experiences and meaning-making of individuals who may be impacted by secondary traumatic stress.
In 2011 a study of 3,000 first-year college students at two mid-size public universities, found that 66% of students were exposed to traumatic events and nine percent met DSM criteria for Post-Traumatic Stress Disorder, PTSD (Read, Ouimette, White, Colder, & Farrow, 2011). While this study represents a small sample of the larger college population, it is illustrative of a larger trend, where it has been found that between 67% and 84% of college students have been exposed to potentially traumatic events (Bernat, Ronfeldt, Calhoun, & Arias, 1998; Read et al. 2011). Unfortunately, many college counseling centers have extremely low student-per-counselor ratios, averaging 1,700 student-per-counselor, resulting in students experiencing long wait times (Association for University and College Counseling Center Directors, 2013). Given the proximity of student affairs professionals to the day-to-day lives of students, these professionals often find themselves offering support for students who do not feel comfortable seeking help from licensed counselors or find themselves experiencing a long wait for counseling services (Reynolds, 2010). This trend is also underscored by a recent study of over 600 student affairs professionals where slightly over half of respondents stated that they support students through trauma at least a few times per month on average each academic year (Lynch & Glass, 2018).

As previously described, working with traumatized individuals has been shown to leave professional helpers at risk for psychological harm, particularly in the form of secondary traumatic stress. Along with counselors, social workers, and teachers, student affairs professionals may certainly be classified as professional helpers, or persons who have professional interactions meant to personally develop another person or assist them with other personal issues (Graf, Sator, & Spranz-Fogasy, 2014). Yet, scholars and practitioners have not thoroughly explored secondary trauma as an outcome associated with the trauma support work in which student affairs professionals may be increasingly engaged. Miller (2016) poignantly describes how the student affairs profession, as a whole, continues to struggle with balancing student support with the well-being of those who are called to engage in trauma support work:

> 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 (p. 141).

The magnitude and diversity of student traumas has increased, and student affairs professionals, often closest in proximity to these students, may find themselves as first-responders providing some level of trauma support.
Current scholarship in higher education and college student affairs does not address how trauma support work impacts the personal and professional well-being of these individuals, particularly those professionals who may not have received rigorous training in counseling or social work. This study attempts to lay the groundwork for further investigation through exploration of the lived experiences of student affairs professionals who have supported students through trauma.

**Methodology**

This study was conducted using Moustakas (1994) as a guide for employing a phenomenological approach to data collection and analysis. Specifically, phenomenology may be described as a means of “[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). Additionally, the phenomenological approach seeks to first understand the perspective of those experiencing the phenomenon, then build a description based off of those narratives. In this study the phenomenon was the personal and professional impact of supporting college students experiencing trauma. To that end, the phenomenological approach as defined in Moustakas (1994) employs the use of a multistep process, described in subsequent sections, including bracketing, phenomenological reduction, and imaginative variation. Moustakas (1994) also describes study participants as having equal stake in phenomenological investigations encouraging the term co-researcher instead; therefore, *co-researcher* will replace the traditional term of *participant* in this study.

In order to enhance the richness of co-researcher narratives, and provide another mechanism for data-triangulation, I also employed the use of an emergent methodology known as arts-based research, or ABR (Rolling, 2013). Although art has been a mechanism for communicating human thoughts, ideas, and emotions for thousands of years (Rolling, 2013), scholars and practitioners have increasingly utilized artistic expression for use in counseling (Rosen & Atkins, 2014; Rubin, 2016). One of the most widely recognized examples of the use of art in counseling was Rorschach’s inkblot test (Tibon-Czopp & Weiner, 2016).

Emerging from K-12 education research (Greenwood, 2012; Wang, 2016), ABR has been connected with several outcomes desired within qualitative research including alleviating stress and power dynamics that may arise in a researcher-participant relationship, building trust, and creating more in-depth and engaging interviews (Rolling, 2013). These outcomes assist in creating rich pools of data for qualitative researchers. For the purposes of this study, visual art was used as a mechanism to process and communicate potentially difficult experiences for co-researchers.
Given the flexibility of ABR and the rich pools of data produced from ABR, blending phenomenological and ABR methods provides additional avenues to communicate and explore the lived experiences. Blending phenomenology and ABR has been documented in both the higher education and psychology literature. Specifically, Thomas (2016) used an art-based phenomenological approach utilizing photography as a mechanism to mindfully reflect on the experiences of caregivers to dying family members. Phillips (2004) used ABR to supplement a phenomenological study of first-year male-identified athlete experiences by employing participant-generated drawings. The blending of ABR and phenomenological approaches is beneficial in several ways, including uncovering participant experiences, adding depth to experience through artistic expression, providing a mechanism for participants to reflect more deeply, and providing a way for participants to actually see a visual representation of their own experiences (Cohen-Miller, 2018).

Statement of Positionality

Moustakas (1994) described the importance of the primary researcher to set aside predetermined notions of what they believed constituted the phenomena under investigation. Using the Greek notion of *epoche*, or “to stay away from or abstain” (Moustakas, 1994, p. 85), I use this section to briefly describe my own experiences as a higher education professional who supported students through trauma, and the impact this work had on my personal and professional well-being.

I have worked in the field of college student affairs as a professional and paraprofessional for nearly a decade, with experiences at several institutions focusing on a variety of functional areas including residential living, fraternity and sorority life, student conduct, multicultural affairs, and academic support programs. In these positions, particularly within my role in residential living, I have supported students through a wide range of traumas including poverty, acts of sexual violence, completed and attempted suicides, severe mental health issues, natural disasters, and bias-related trauma. Although I received some training in order to provide a base-level response for these students, I did not realize, or understand how to process, the individual and cumulative impacts these events would have on my personal and professional well-being. This led to a number of negative personal outcomes, and my ultimate departure from residential living. Yet, despite accepting employment in another functional area, I found that the impact of my exposure to students experiencing trauma did not necessarily disappear. Looking back on these experiences, as well my own life experiences, inspired me to seek a more nuanced understanding of how student affairs work is experienced by other student affairs professionals, specifically through the lens of psychological trauma.
Co-Researcher Recruitment & Selection

For this study, co-researchers were selected using criterion-based sampling (Merriam, 2009). Criteria for participation included being a full-time employee, or graduate assistant, in functional area identified by the Council for the Advancement of Standards in Higher Education (Wells, 2015), including higher education faculty, and experience supporting students through a traumatic life-event within the context of their employment.

Co-researchers were recruited using an existing pool of participants who completed a pilot survey (Lynch & Glass, 2018) intended to measure various DSM-V criteria for traumatic stress (American Psychiatric Association, 2013). At the end of the survey, participants had the option of indicating their interest in participating in a follow up qualitative study. From this pool, participants were sent emails detailing the purpose and requirements of the study, as well as an informed consent form. Originally, 60 individuals indicated interest but only 30 committed to the full study.

Data Collection

To bolster the trustworthiness of findings, I triangulated multiple methods of data collection, each that provide a different perspective regarding the experiences of each co-researcher. Moustakas (1994) described bracketing as an essential part of the phenomenological process, whereby the researcher creates boundaries around the phenomenon at-hand in order to create focus for both the primary researcher and co-researchers. In order to bracket the phenomenon of secondary trauma, protocols were created for the visual representation exercises and interviews to keep co-researchers focused on their specific recollections dealing directly with their support of students experiencing trauma.

Visual representation exercise. Each co-researcher completed an independent visual representation exercise prior to each interview. Instructions were sent to each co-researcher specifying how to complete the activity, as well as information regarding submission of the final product. Before engaging in the activity, co-researchers were asked to spend 30 minutes to one hour reflecting on times that they have supported college students through various traumatic life events. They were then instructed to create a visual representation of their experience, emotions, and meaning making process while they engaged in this support, as well as after their support ended. Co-researchers were able to use any visual medium to which they had access. The only constraint placed on the activity was the prohibition of the use of non-stock photos featuring the faces of other people. This ensured that non-participants were not inadvertently included in published materials. Co-researchers were instructed to take a photo of their final product and save an electronic version of it using their pseudonym as the title. They were
then asked to submit their saved electronic photo to a university-encrypted
electronic storage website.

**Recorded interviews.** After completion of the visual representation exer-
cise, each co-researcher participated in a semi-structured interview (Merriam,
2009) that took place either in-person, by phone, or using WebEx web-
conferencing software. Interviews were arranged via web-based scheduling
software using predetermined co-researcher pseudonyms. Each interview
lasted at least one-hour, with some interviews lasting up to two hours. The
first part of the interview involved a reflective exercise, while the second part
consisted of questions regarding the co-researcher’s experience supporting
students through trauma, as well as the results of their visual representation
exercise. Before each interview co-researchers were reminded of their rights
as a participant in the study, as well as psychological resources available to
them should the interview trigger negative emotional responses.

At the beginning of each interview, co-researchers took part in a reflective
activity that used open-ended prompts similar to the format of a subject-
object interview (Lahey, Souvaine, Kegan, Goodman, & Felix, 2011). In
consultation with a licensed counselor, this process included the creation
of a list of words that may be associated with symptoms of traumatic stress
identified within the DSM-V (American Psychological Association, 2013):
support, mood, trauma, community, distress, irritable, stress, guilt, alien-
ation, avoidance, torn, angry, recurring thoughts. Co-researchers were given
15 minutes to reflect on these words and write down any initial thoughts,
emotions, or memories that came to mind for each word. I then engaged
co-researchers in a conversation regarding words that stood out most and
words that stood out least before moving onto the rest of the interview. This
activity allowed for co-researchers to bracket their thoughts around experi-
ences of trauma support.

**Field texts.** In order to document the detailed contexts in which each inter-
view took place, I completed a brief reflective journal, or field text, after each
interview (Merriam, 2009). Field texts included information documenting
the medium used to conduct the interview, attitudes and dispositions of the
researcher and interviewee that may be relevant to the later interpretation
of transcripts, engagement in reflexivity, and lists of emergent ideas about
the nature of secondary trauma.

**Data Analysis**

Data analysis involved phenomenological reduction, imaginative variation,
and composite textural and structural descriptions. The goal of the phenom-
enological reduction was to describe commonalities across co-researcher
experiences that addressed the *what* of the phenomenon. Bracketing was
essential to this process, in order to focus only on information that is relevant
to the phenomenon.
In order to identify emergent commonalities of the phenomenological reduction, I used a technique Moustakas (1994) identified as *horizontalization*. After ensuring my familiarity with the data through repeated readings and viewings, I entered the process aiming to treat each co-researcher statement and visual representation with equal weight. For each co-researcher interview, I identified statements that seemed to directly describe the experience of secondary trauma and documented them in a Microsoft excel file with a section for each co-researcher. Co-researcher visual representations interpretations were analyzed using open coding as a means for visual content analysis (Saldana, 2012). I identified aesthetic attributes such as color, use of human figures, level of abstractness, etc. I also identified emotive attributes that I felt each representation conveyed in addition to the emotions identified by the co-researcher. These attributes were also documented in a Microsoft excel file with a section for each visual representation. It should be noted that discussion of the visual representations, and their meaning to the co-researchers, took place during the interview process; therefore, my interpretations may have been impacted by the interviews. The visual analysis was integrated with the textural analysis for the phenomenological reduction in order to engage in a more nuanced exploration of what comprises the phenomenon of secondary trauma.

Once all relevant statements and visual representation attributes were identified, I began grouping the statements and attributes based on commonalities within each co-researcher’s narrative. Using these groups, or invariant themes, I created individual textural descriptions that described how each co-researcher experienced the phenomenon. A single composite textural description was then created using meta-themes that emerged across all individual textural descriptions.

The next step, imaginative variation, was used to describe commonalities across co-researcher experiences that describe *how* the phenomenon occurred. Imaginative variation required deep reflection on the data to view each experience from the multilayered perspective of both the co-researcher and primary researcher to derive how secondary trauma manifests itself across narratives. Using the individual textural descriptions, I began the process of creating a list of ideas of how each co-researcher’s experience led to their experience of the phenomenon described within the textural descriptions. These items were then grouped by similarity to create structural themes. Using these themes, I constructed an individual structural description for each co-researcher detailing how they came to experience the phenomenon of secondary trauma. Finally, a single composite textural description was created highlighting common factors that led to the experience of the phenomenon across co-researcher experiences.
Using the delimited horizons and structural themes identified, I created individual structural descriptions for each co-researcher, describing what they experienced and how they came to experience it in regard to secondary trauma. The thematic outcomes of this process are described in the findings section as the synthesis of composite structural and textural descriptions.

**Trustworthiness**

The trustworthiness of this study was addressed throughout the research process using four constructs identified in Shenton (2004): confirmability, dependability, transferability, and credibility. To address issues of credibility, I made use of an established qualitative research methodology (phenomenology) and triangulation in data collection using interviews, visual data, and field texts. I also employed the use of an additional transcript coder who was a licensed counselor. Additionally, to attend to dependability of the study, I kept in close communication with co-researchers and provided a chance for feedback for both of their structural and textual descriptions. This process allowed me to adjust my interpretations of the data based on clarifications of the co-researchers. While the goal of this study was not to generalize co-researcher experiences to the greater population of U.S. student affairs professionals, I employed the use of thick description in my explanation of methodology and findings so that the reader may contextualize and transfer findings within their own experiences. Finally, confirmability was addressed by providing a detailed audit of the data collection and analysis processes, as well as a statement of researcher experiences so that readers may understand potential researcher subjectivity within the design and analysis of this study.

**Co-Researcher Profile**

A total of 30 co-researchers participated in the investigation. A majority of the co-researchers identified having one or more of the following characteristics: white, female, straight [heterosexual], new or mid-level professional, completed master’s degree, currently working at a 4-year public institution of higher education, working as a housing and residential life professional, or living in the U.S. south or northeast regions. Given the homogeneity of social identities related to race, gender, and sexual orientation, thematic findings based on co-researcher narratives may present a narrow scope of the experience of secondary traumatic stress. It has been well documented that issues of traumatic stress can disproportionally impact people holding marginalized identities including racially minoritized individuals, women, and LGBT individuals (American Psychiatric Association, 2013). We present a summary of co-researcher characteristics in Table 1.
Table 1. Co-Researcher Demographics

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Findings

Through the process of phenomenological reduction and imaginative variation, participant experiences began to coalesce into several central themes that described the experience of secondary trauma in student affairs work, as well as how this phenomenon manifests in student affairs professionals. Specifically, four themes were frequently found within participant experiences: the impact of trauma support work on personal well-being; the impact of professional and organizational influence on the development of maladaptive views of student support; the professional’s self-efficacy in regard to trauma support; and the importance of personal and professional
support networks to well-being. In the following sections, co-researcher interviews and their visual representation results are presented to create a vivid illustration of each of these core themes.

**The impact of support work on personal well-being.** “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.” “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.” These quotes, taken from an interview with Monica, a new professional working in a sexual violence resource department, and Sophia, a former residence life professional, poignantly describe the experience of many professionals I interviewed. Whether expressed through deleterious personal habits such as increased substance abuse and unhealthy eating habits, increased physical maladies, or significant changes in emotional state, such as irritability, depression, or guilt, few co-researchers found themselves ending their trauma support encounters without some level of negative personal impact. In Figure 1, Xavier, a new professional in health and wellness programs, depicts the chaos and emotional distress he experienced stemming from student traumas.

One of the most extreme examples of this theme came from the experiences of Krista, a current career services professional and former residential life professional. In both positions, Krista described supporting student communities after a series of student suicides and sexual assaults. Her pain was evident as she remembered these crises, stating, “I mean, what are the staff supposed to do when [student crises] are coming just one after the other after the other after the other?” Eventually Krista hit a wall. Unable to find healthy ways to cope with her emotions stemming from her support work, she turned to alcohol, but eventually found professional help of her own. She reflected:

I mean, to be completely honest, I self-medicated, and I self-medicated a lot for a while…so I was abusing alcohol, which then created my own sort of issues in life, from a general sense, as one might imagine. Then I actually started seeing a counselor…I let myself feel and I let myself grieve, but I don’t let myself sit and wallow in the situation ’cause the fact of the matter is I did what I could…I worked a lot on acceptance, of needing to accept that I can’t do everything—so I’ve really kind of limited my expectation of myself and forgiven myself.

In addition to impacts on physical and psychological well-being, co-researchers described their experience as making them angry or irritable. Luke illustrates this point as he shares the impact support work had on his personal relationships:
I would definitely say the irritability piece...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 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.”

While many participants shared stories of how their support of students experiencing trauma led to a variety of negative outcomes, some participants did describe the ways in which their trauma support led to personal growth and increased confidence. For example, Coleman, a new professional in residential life, shared:

I don’t think [I’ve experienced] a negative impact so much as [developed] a tool set. I would feel fully comfortable handling a situation taking place out of a college…somebody gets way too wasted at a wedding and [I] figure out, okay, do they need help? Do they need to get propped up, do they need to be asked questions? You know, it sort-of builds my familiarity with [crises] and responses to [crises]. It’s a mixed bag because it’s like, “oh man, these things are crappy,” but I now have a larger tool set.
Throughout Coleman’s narrative, he framed his experience supporting traumatized students as a way of building a skillset that would serve him in other areas of his life, as well as future positions. His experience may serve as a clear example of post-traumatic growth through his ability to reframe student trauma and make meaning of his experiences.

**Impact of professional and organizational influence on the development of maladaptive views of student support.** Whether overt mandates from organizational leaders, or unintentional messages sent via the process of professional socialization, many co-researchers expressed difficulty dealing with perceived ways in which professionals are supposed to support students. Co-researcher accounts of being put in compromising situations with little preparation or being silenced when trying to express their own negative emotions resulting from trauma support, were frequent. Many co-researchers also expressed an internalized philosophy that centered student support no matter the cost to themselves. In Figure 2, Angie, a mid-level professional working in civic engagement and service learning, illustrates this point. Using her drawing, she conveys both the care she has for her students and the pain she experienced as a result of her work. When asked about her experience completing the visual representation exercise, Angie shared:

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 [time 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.

One way in which co-researchers expressed their development of misinformed views of student support was due to poor supervisors, or perception of retribution from division leadership. Many co-researchers shared a level of hypervigilance, or abnormal alertness to potential threats or danger, when it came to supporting students and potential repercussions for their own employment, their reputation, or even the student’s well-being. Luke, a new professional in campus activities, exemplified this when he recalled:

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.

Scarlett, a mid-level professional in campus activities, expressed frustration on a systemic level when it came to balancing her own experience of trauma support with the expectations of her supervisor, her university, and the field of student affairs. She shared:
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.

Although supervisory relationships were frequently mentioned by co-researchers, many of whom also described how peer-to-peer relationships contributed to their views of ideal student support. Bonnie, a campus activities professional who serves on the university emergency on-call rotation, shared her memories of first serving in an on-call capacity:

I think feeling guilty for not being able to help students and not being able to manage things the way that my peers did… 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 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.
From the perspective of a senior student affairs professional, Leslie, the landscape of secondary trauma looked different. As a seasoned professional, she attributed maladaptive views of student support to an individual’s tendency to go above-and-beyond the call to duty. Leading her staff through a mass-casualty that impacted her entire campus, she noticed how other professionals volunteered to stay on campus to offer support without having been asked. She explained:

This is a profession where [individuals] 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.

From Leslie’s perspective, there was not an explicit expectation that staff are present throughout the crisis event. Instead they chose to offer their services of their own accord. Yet, contrasting Leslie’s views with Luke’s experience of being fearful of upper level administration, there may be opportunities for clearer communication of expectations between senior level professionals and their staff in regard to boundaries for student support.

Professional’s self-efficacy in regard to trauma support. Throughout each interview with the co-researchers, their belief—or lack of belief—in their ability to effectively support students experiencing trauma and maintain their own well-being was a central point of discussion. Margaret, a new housing professional, used her visual representation to speak to her avoidance of dealing with the memories and emotions associated with student trauma. She spoke to an incidence of domestic violence where a student nonchalantly described her repeated abuse. Margaret recalled:

I just don’t even want to think about [the student’s experience]. Like it just makes me feel so deeply horrified and sad. 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.

Matt, a senior level administrator working in leadership and civic engagement programs, continued this theme by describing his internal struggle with how he processes his role supporting students through trauma. Matt shared:

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...I don’t know if it’s good when I’m hearing a student tell me their life story, 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 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. 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.

While many co-researchers spoke to their ability to cope with their trauma support duties, others spoke to the level of confidence in their ability to be an effective support person. Clarissa, a mid-level professional in campus activities, found herself serving in an on-call crisis management rotation at her university. She described a strong sense of self-doubt and noted that this was not an aspect of the position she expected to have to fulfill given her functional area. Clarissa stated:

If I’m responding to [a crisis] more as an individual, I worry more. I get stressed out, and I would like to avoid that, 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.

Figure 3. 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.
Clarissa’s experience also emphasizes how many professionals who enter the field expecting a specific range of responsibilities may be thrust into crises management roles, with or without appropriate support.

**Importance of personal and professional support networks.** Each co-researcher recalled a number of memories of how they experienced, or did not experience, support both personally and professionally. They also shared how this support bolstered, or inhibited, their ability to balance their support of students with their own personal well-being. In Figure 4, Elizabeth, a mid-level professional in student conduct, used her visual representation to illustrate the balance she has in her life, mainly through the support of her supervisor, colleagues, and partner.

Beth, a new professional in housing, also spoke to the importance of personal support networks as she described the level of comradery she held with her colleagues. Her story was not unique in how she described a very specific type of support that can only come from peers who have a practical understanding of her professional experiences. Beth explains:

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. [A co-worker] 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.

Clarissa explained similar sentiments from a more general perspective. She used a metaphor relating trauma to rocks that professionals carry around and share with each other. She states:

I think sometimes we’re 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…My husband is a lieutenant in the fire department…I think [his profession] is a similar concept except way more intense…They just have an understanding of what their world is and how they can talk about it… 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.

Yet, not all co-researchers felt support within their work environment. Many co-researchers spoke of toxic supervisory relationships or isolation due to a lack of teamwork and kinship among coworkers. Scarlett felt this
sense of isolation from her staff and supervisor as she supported a student after a sexual assault, as well as another student experiencing a severe mental health disability. Scarlet shared:

I think a lot of [stress] 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] ... 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 [to lead others]. 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.

Scarlett’s experience underscores how student trauma, organizational environments, support networks, and maladaptive views of student support can coalesce to create untenable environments for student affairs staff.
DISCUSSION

The purpose of this study was to explore the nature of secondary trauma in student affairs work and the impact of trauma support work on personal and professional well-being within a sample of college student affairs professionals. Through textural and structural descriptions, several themes were uncovered within participant experiences including: lack of peer and supervisory support, lack of opportunities to process and reflect on trauma support, unhealthy perceptions of what it means to be a professional helper, and lack of confidence in professional’s training and ability to engage in trauma support work. The impact of trauma support work on co-researchers' well-being was wide-ranging. They often described specific impacts such as negative changes in moods, behaviors, and physical well-being. These incidents involved exaggerated expectations of oneself and others, hypervigilance, and self-doubt. They also included the experiencing anxiety, depression, guilt, and irritability, substance abuse, poor eating habits, high blood pressure, and headaches. Finally, findings were mixed in relation to college student affairs professionals' meaning-making regarding the traumas their students experienced. Perhaps one of the most poignant outcomes of co-researcher narratives was a lack of time or interest in reflecting on how their support of students experiencing trauma may impact their own well-being. For many of the co-researchers, participation in this study was the first time they engaged in intentional reflection of how their work impacts their well-being. Most expressed gratitude for the opportunity to participate in the study and wished for a space to further engage in reflection. Many co-researchers did not directly identify any particular thoughts in regard to the meaning they had made of their experiences. Yet, for those who were able to articulate their thoughts and feelings, they spoke to increased levels of confidence or post-traumatic growth (Ben-Porat, 2015), as well as an affirmation of purpose and good work they engage in on a regular basis.

This study makes significant contributions to the current literature within higher education, as well as the study of secondary trauma across helping professions. While scholars in fields such as counseling, social work, and K-12 education have documented the impact (Hydon, 2015), catalyzing factors (Crumpei & Dafinoiu, 2012), and mitigating factors (Bride et al. 2014) associated with secondary trauma, current research uses quantitative measures. The present study provides a rich account of the nuances in the lived experiences of professional helpers experiencing symptoms of secondary trauma, adding thick narrative descriptions to quantitative measurements in the current literature (Bride et al., 2004; Lynch & Glass, 2018). Findings illustrate outcomes consistent with studies exploring the importance of self-efficacy (Bride et al., 2004; Crumpei & Dafinoiu, 2012; Lynch & Glass, 2018) in lessening the impact of secondary trauma, the impact of support

Within the higher education literature, this study introduces an alternative perspective on the impact of student affairs work on well-being. While burnout (Brewer & Clippard, 2002) and compassion fatigue (Hoy, 2014; Stoves, 2014), are often cited as conditions impacting the well-being of student affairs professionals, this study uses the lived experiences of professionals to introduce the phenomenon of secondary traumatic stress as another condition to consider. Additionally, this study embraces the subjective emotional dimensions associated with trauma support work in student affairs, but often overlooked as not-relevant in discussions of student trauma support. Whereas existing literature conceptualizes well-being as the positive self-report of physical, emotional, cognitive, and social welfare (Health Related Quality of Life, 2016), the findings adds further context by exploring the complex meaning-making processes that underlie such self-reports. Rather than simply a positive self-report, the impacts of secondary traumatic stress on well-being are explored with greater nuance and complexity in their specificity (e.g. hypervigilance, substance abuse, etc.) and multidimensionality (e.g., post-traumatic growth despite negative experiences). The qualitative nature of this study addresses concerns such as those of Palmer and Zajonc (2010), noting that “academics who factor out ‘subjective emotions’ in favor of data-based ‘objective knowledge’ will, at the same time, blithely ignore fifty years of research about the importance of attending to emotions if we want to liberate the mind” (p. 42).

**Implications for Practice and Further Research**

In this study I sought to understand and describe the nature of secondary trauma in student affairs work within a sample of U.S. college student affairs professionals, particularly as it impacted their personal and professional well-being. The implications of co-researcher reflections may better inform current practitioners and supervisors, divisional leaders and human resources practices, and professional preparation program curricula that may improve policies and practices that balance student support with the personal and professional well-being of professionals acting in support roles.

On the ground-level, supervisors of student affairs professionals who may be supporting students experiencing trauma should undergo training to better understand the nature of trauma and develop a trauma-informed philosophy of supervision. These trainings may be provided at an institutional level through outsourcing or tapping faculty-experts in departments such as counseling and social work but may also be provided through national organizations in the form of pre-conferences and institutes. Additionally,
supervisors should be intentional in establishing communication and embedding expectations regarding creating professional communities of support for professionals engaging in trauma support work. This may take the form of intentional conversations during one-on-one meetings with supervisees, creating flexible leave policies, or providing resources for professional development regarding the creation of positive habits in relation to work and well-being.

Divisional leaders and senior student affairs officers may use the information in this study to develop tools to investigate the nature of secondary trauma within their own organizations. Tools may include developing surveys or focus groups to understand the level of impact student trauma may be having on their employees. These leaders may also consider partnering with their human resources departments to explore equitable ways in which staff may be trained and supported in regard to dealing with student trauma. Examples of this may include exploration of compensation policies that cover a minimum number of visits for an outside counseling service, mandatory paid leave to recover from traumatic incidences that rise to a pre-determined threshold or restructuring of job descriptions to create boundaries and expectations regarding professional interaction with students experiencing trauma.

Finally, this study may be used in guiding the development of curricula in student affairs preparation programs as well as other organizations responsible for professional preparation and development. Currently, a number of programs offer some form of courses centering on professional helping skills, but these courses may not cover skills that go beyond coaching and group dynamics that may be used in student trauma support. Instead, graduate programs may look to social work programs to develop courses that take into account practices, such as case management, boundary setting, and self-care. Providing opportunities for reflection on such learning outcomes could also be incorporated into conversations and assignments for coursework that accompany practicums, internships, and assistantship experiences.

Little research exists on the outcomes of increased trauma support expectations on the personal and professional well-being of student affairs professionals. This study offers a foundation for scholars wishing to further understand this phenomenon and mitigate adverse impacts. Most immediately, scholars should further explore personal factors associated with secondary trauma identified in other helping professions. For example, the literature reflects that individuals who possess minoritized identities may be more susceptible to the development of trauma-related mental illness (American Psychiatric Association, 2013). Although the present study explored perspectives of individuals with diverse backgrounds, there was not a particular focus on how racial, gender, and sexual orientation identities may be impacted in different ways. Additionally, the literature reflects the notion that pre-existing mental illness or previous personal traumatic experiences
leaves individuals open to developing secondary traumatic stress (Cieslak et al., 2014). Future studies may explore the outcomes of student affairs who have experienced trauma who also have engaged in trauma support work. Conversely, scholars may choose to expand understanding of secondary trauma in higher education by exploring the efficacy of intervention programs targeted at preventing secondary traumatic stress or promoting post-traumatic growth. Using experimental methodologies, researchers may begin to equip practitioners with skillsets and mindsets to support students without putting themselves at risk of harm, as well as methods for developing post-traumatic growth.

Limitations

This study is not without limitations, which should be taken into consideration when contextualizing the findings presented. Namely, this study was not intended to be generalized to the broader population of student affairs professionals, but instead to provide a deep description of the experiences of professionals who have engaged in trauma support work. Co-researchers were not asked about existing mental health conditions or diagnoses of trauma-related illness; therefore, participant experiences may have been impacted by a number of factors that were not explored in this study.

Additionally, this study involved disclosing memories and emotions of a deeply personal nature. While great care was taken to create a comfortable environment to explore co-researcher experiences, some co-researchers may not have felt comfortable in sharing their full stories or particularly painful details. It should be noted that this study began with an anticipated participant pool of 60, but half dropped out prior to the beginning of the study due to a variety of reasons, including the need to not recount painful experiences.

Conclusion

The rate and magnitude of student trauma is of increasing concern as scholars, administrators, and policymakers grapple with how to manage behavioral health and wellness concerns. Scholarship in other helping professions indicates that in order to provide the best support mechanisms for those experiencing the negative psychological effects of trauma, professional helpers must protect their own health, both physically and mentally. Unfortunately, to date, the field of higher education and college student affairs has not fully conceptualized the negative impacts trauma support work may have on professional staff members who are expected to provide help to students experiencing crises. Through a phenomenological analysis of the experiences of 30 student affairs professionals from across the U.S., this study provided a thick description of the cumulative impact of trauma support work, the deleterious impact on professionals’ mental health, and the
lack of professional preparation and support to protect their own well-being. Scholars and practitioners may use these narratives, as well as suggestions for future research and practice, to begin addressing the evolving phenomenon of secondary traumatic stress in higher education.

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