

VICARIOUS TRAUMA, EMOTIONAL INTELLIGENCE, AND THE IMPACT ON JOB
SATISFACTION IN RESIDENCE LIFE STAFF

by

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A dissertation submitted in partial fulfillment of the requirements
for the degree of Doctor of Education
in the Department of Child, Family, and Community Sciences
in the College of Education and Human Performance
at the University of Central Florida
Orlando, Florida

Summer Term
2016

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ABSTRACT

“There are wounds that never show on the body that are deeper and more hurtful than anything that bleeds.”

— Laurell K. Hamilton,

Due to the proximity of working with and engaging students, residence life staff members, have a unique work experience. This functional area of student affairs is responding to myriad student needs. Staff are responding to varying levels of campus emergencies, student illness, and assault (physical or sexual) on a given workday or workweek (Ojo & Thomas, 2012). One study found college students’ on-campus lifestyle and routine activities can create opportunities for victimization (Fisher, Sloan, Cullen, Lu, & 1998). What cumulative impact does responding to these victimizations have on residence life staff members? This study will investigate the relationship between the exposures to vicarious trauma, considering emotional intelligence as a mitigating factor to explain job satisfaction of residence life staff members.

Taking a closer look at how the continued exposure to victimization of others (in this case students), the individual’s job satisfaction provides context to burnout and attrition, specifically in residence life professionals. Understanding how secondary exposure can impact a professional is a concern that has been studied in other professions such as nursing, social work, and mental health counseling. The findings have provided invaluable insight to the professional’s experience. This study will attempt to do the same by exploring how these three variables interact with each other, through the use of three scales, Vicarious Trauma Scale (VTS), Genos-Emotional Intelligence Inventory (Genos-I), and Job Satisfaction Scale (JSS).

This dissertation is dedicated to my family; because of your continued support and sacrifice, I was able to complete this body of work. To my mother and stepfather Eulyne and Elroy Caines you always believed in my academic dreams.

ACKNOWLEDGMENTS

Thank you to my dissertation chair Dr. James Tom Owens for pushing me to mature in the literature and to Dr. Rosa Cintrón, for your mentorship throughout my graduate work. Thank you to my committee members Dr. Mark Winton, Dr. Kay Allen, and Dr. Michael Preston for their service to the educational experience, time, and expertise to this research. Thank you to my family and friends for always encouraging me to read and pursue my educational goals. Thank you to my supervisor Meredith Varner for giving me the space to focus on my research and for being a major supporting factor to complete my degree. Thank you to Samuel Arocho and my church family, for continuously praying over me during this time. Thank you to Dr. Shelly Wyatt for your encouraging words and guidance as I pieced together this body of work. Without all of you, this dream would not have become a reality.

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VIGNETTE

My professional career began in residence life August 2005. The first duty weekend would be the test of my ability to do this work. My first traumatic occurrence was a sexual assault. The police department needed a residence life staff member to speak with a student because she would not answer their questions; that staff member was me. The call, was very early in the morning and I had just walked back into my apartment from another incident. I was tired and physically exhausted from the share number of calls from the weekend, but this call awakened every sense in me and I quickly gathered myself to respond to the location. She was sitting on the curve in shorts and a hoodie, surrounded by officers. The commanding officer quickly got me up-to-speed and asked me to try to get the student to talk. Her body language indicated she was still in shock and I was tasked with what at the time seemed like a ridiculous assignment. Internally, I wanted to go somewhere private with her, but with my training, I knew I needed to stay where the officers could observe and hear our conversation. I tried to recount everything I learned in training just 2 weeks prior, but everything went out the window once she looked me in the eyes. I asked her quietly if I could sit with her, she barely acknowledged me. I knew I had to ask all the right questions, but instinctively I wanted to shield her and tell her everything would be okay. Instead, I asked one question, “what do you want to do”, her response “go home”. In that moment her need to leave was more important than policy or procedure. I looked at the officer in charge and he acknowledged with a head nod that this case would need to be investigated in another way. I sat with her for another hour until she asked if she could return to her room. I let her leave and gave her all the resources she needed to withdraw from classes. That early morning call forever changed me as a professional and I am still emotional recounting the incident a decade later. This story is just one of the many stories that I experienced doing the work as a residence life professional. Every incident has changed me in one way or the other.

CHAPTER 1 THE PROBLEM AND ITS CLARIFYING COMPONENTS

General Background

In 2008, the Association of College and University Housing Officers-International (ACUHO-I) reported that housing operations continue to have a shortfall in candidates applying for positions. Janosik (2007) suggested a major concern for new residence life staff professionals was the obligation to act or respond to situations around the clock (24 hours a day, 7 days a week). Another concern, cited by Burkard, Cole, Ott, and Stoflet (2005), consists of the increasing need for counseling and human relation skills in order to work successfully with on-campus students. The academic literature suggests that residence life staff endure heavy workloads (including evenings and weekends) and must rise to the challenge of responding to different types and degrees of crises (Collins & Hirt, 2006). Residence life, a function of student affairs, is also experiencing stressful conditions, coupled with demanding job responsibilities specific to the job functions, leading to challenges in the recruitment and retention of residence life staff.

Business Insider, in a 2013 comparison study, identified 14 occupations that were the most stressful in the US. This study measured high-stress situations, consequence of employee errors/mistakes, time pressure, and strictness of deadlines. Among 474 selected occupations, education administrator ranked as one of the 14 most stressful jobs in America (Giang, 2013). Similarly, the Boston Consulting Group identified financial instability as a stressor in higher education; the report indicated that, during the 2012-2013 fiscal year, state funding of higher education declined to its lowest level in a decade. These revenue shortfalls translated into

several institutions merging with nearby schools, resulting in job strain (Henry, Pagano, Puckett, & Wilson, 2014). Demanding schedules combined with the challenge of engaging students, creating work-life imbalance, lead student affairs professionals to experience high stress levels, low job satisfaction, burnout, and high attrition rates (Guthrie, Woods, Cusker, & Gregory,

Statement of the Problem

For some students, living and learning as part of a residential campus community seems inherently safer than living anywhere else, creating a false sense of security and thus positioning them to become victims of crime. One report found college students were at risk for specific types of victimization, such as sexual assault and theft (Fisher, Sloan, Cullen & Lu, 1998). Due to the close proximity to staff, many students who are victims of crimes or the subject of student code-of-conduct violations report their victimization to a residence life staff member (Kuh & Whitt, 1988). Residence life staff then refers students to the appropriate office, including law enforcement, victim advocate, student conduct, or health services (Ong, Petrova, & Spieler, 2013). This experience of assisting students during times of crisis may expose the residence life staff to vicarious trauma.

In addition to victimization, residence life staff responds to mental health and behavioral concerns. And there are numerous mental health and behaviors concerns associated with college student populations. For example, a 2005 study found suicide to be a leading cause of death among college and university students in the US (Schwartz, 2006). In addition, students experiencing suicidal ideation also exhibit high-risk behaviors such as substance

abuse/dependency, a sense of hopelessness, interpersonal difficulties, and academic struggles (Suicide Prevention Resource Center [SPRC], 2014).

With the primary focus on supporting students, staff members' own needs may be neglected. Currently, the models of support services in place are for students and those directly involved in a traumatic experience; what is missing is any focus on the impact of such events to staff members assisting students. Reactions to work-related stressors result in a wide range of cognitive-emotional responses; therefore, staff members' ability to support students and colleagues after directly or indirectly hearing about stressful events can impact job satisfaction (Schwitzer, 2004). The focus of this study will be to examine the impact of continuous exposure to traumatic events (including micro-traumas) on job satisfaction, and to what extent emotional intelligence can mitigate vicarious trauma in order to better explain the experience of a residence life staff member.

Theoretical Framework

There are several multi-layer responses to trauma exposure based on an individual's previous experiences, background, training, and worldview. However, researchers understand that a staff member's response to trauma is embedded in their emotional competence (Saakvitne, Tennen, & Affleck, 1998). Therefore, the complex human responses to exposure to a traumatic event or series of events, along with the potential for corresponding cognitive manifestations, resist easy measurement. The scholarly literature related to reactions to trauma (directly or vicariously) suggests that a relationship exists between an individual's emotional awareness or intelligence and whether exposure to trauma has a positive or negative impact on work

performance (Nikoulaou & Tsaousis, 2002). This connection between emotional awareness and work performance is key to exploring the intersection of vicarious trauma (cognitive changes), emotional intelligence (emotional processing), and job satisfaction (work performance). Therefore, the theoretical perspective used to better understand possible cognitive changes in residence life staff is the conservation of resource theory (COR). The COR theory suggests that individuals work towards retaining, protecting, and building resources in order to manage stress (Hobfoll, 1989). This theory explains a coping and cognitive strategy that individuals use to manage stress.

Research Questions

In order to better understand the relationship between exposure to vicarious trauma, emotional intelligence, and job satisfaction, this study will explore the following research questions:

1. To what extent are residence life staff exposed to vicarious trauma?
2. To what extent might emotional intelligence mitigate the effects of vicarious trauma with regard on impact job satisfaction?

The premise of this study is this: residence life staff members, as part of their work, are exposed to various types of student trauma and may, as a result, experience vicarious trauma. For staff members who experience vicarious trauma, how is emotional intelligence mitigating the vicarious trauma and impacting job satisfaction? The literature suggests that job satisfaction is a function of work performance and can be correlated to emotional intelligence (Greenidge,

Devonish, & Alleyne, 2014). Therefore, investigating how these variables affect each other could provide insight to the residence life professionals' experiences.

Definition of Terms

Burnout: long-term exhaustion and diminished interest in work (Maslach & Florian, 1988).

Compassion Fatigue: a gradual lessening of concern for others over time (Hopkins & Goss, 2013).

Conservation of Resource Theory: a biological desire to retain, protect, and build resources in order to manage stress in the environment and in cognition (Hobfoll, 1989).

Emotional Competence: a person's ability to express or release inner feelings-emotions (Bar-On, 1997).

Emotional Intelligence: the ability of individuals to recognize their own and other people's emotions, to discriminate between different feelings and label them appropriately, and to use emotional information to guide thinking and behavior (Bar-On, 1997).

Job Satisfaction: degree to which an employee is satisfied and happy with his job (Locke, 1976).

Post-Traumatic Stress Disorder (PTSD): an anxiety disorder that may develop after a person is exposed to one or more traumatic events (APA, 2014).

Residence Life: an auxiliary service found at college/university that houses students in housing facilities (CAS, 2009).

Secondary Traumatic Stress (STS): emotional distress that results when an individual hears about the firsthand trauma experiences of an individual (Saakvitne et al., 1998).

Staff: a full-time employee at the university/college whose primary function is to execute the mission of the institution (Brubacher & Rudy, 1997).

Student Affairs: support services for students on college/university campus that enrich student growth and development (Brubacher & Rudy, 1997).

Traumatic Exposure (Experience): emotional and psychological trauma as the result of extraordinary stressor/event; the experience threatens the individual's life, safety, belief system, security, or creates a sense of helplessness (Figley, 2002).

Vicarious Trauma: affective distress and cognitive shifts a person experiences following secondary exposure to traumatic events (Aparicio et al., 2013).

Work Performance: assesses a person ability to perform a job well (Campbell et al., 1993).

Summary

Within the academic institutional structure, residence life staff members play a crucial role in restoring and maintaining order after a crisis or emergency, whether it is large in scope (e.g., an active shooter) or small (e.g., a battery). These crises have far-reaching effects on the campus, and the aftermath of a traumatic experience can prompt a myriad of emotional processing techniques to understand the trauma. The current research is limited to burnout and compassion fatigue as an attrition concern for residence life staff. Responding to incidents and advocating for students in many cases is a 24-hour job. Residence life staff members' close

proximity to students creates opportunities for increased exposure to the wide-range of situations that arise in a student's life, one of which maybe trauma.

A comprehensive review of relevant literature is presented in Chapter 2. The literature review includes a conceptualization of the nature of residence life staff members' work. The goal is to further study this population's experience as they relate to vicarious trauma, emotional intelligence, and job satisfaction. The literature review provides a brief history of student affairs and residence life; this chapter also discusses the three variables, vicarious trauma, emotional intelligence, and, finally, job satisfaction.

CHAPTER 2 LITERATURE REVIEW

Introduction

This chapter offers an overview of student affairs, clarifying the roles and expectations placed on student-affair professionals and providing insight into the changing dynamics between student affairs professionals and students. The next section will include a brief history of residence life and the on-campus experience, followed by an overview of the role of residence life staff (live-in) interacting with residential students. The role of a residence life staff member has the capacity to expose these same staff members to victimization, a consequence of responding to students in crisis or following up with students after a victimizing event. The purpose of this study is to explore the impact of vicarious trauma on residence life staff members.

Historical Overview of American Higher Education

In the United States, colleges emerged as an extension of the church, and its teachings reflected this focus; students learned classical languages and were prepared to be clergymen (Rudolph & Thelin, 1990). However, Enlightenment thinkers challenged this purpose, arguing that colleges should help address human suffering, ultimately leading to state-sponsored colleges. As the Enlightenment era waned, the separation of religion and education continued (Rudolph & Thelin, 1990). In the late 18th century, colleges began transitioning toward a university model, offering advanced instruction in response to the demands for an expansion of the curriculum following the American and French Revolutions (Brubacher & Rudy, 1997).

This movement also promoted the philosophical ideal that knowledge is power (Geiger, 2011). Over time, the definition of the university evolved to include larger educational institutions that provided graduate education. State sponsored colleges required government action that resulted in a shift from religious control to a more secular curriculum (Brubacher & Rudy, 1997). If churches no longer controlled the college, then there would be a need for the public to participate in the process (e.g. grants and supervision).

Educational institutions established a board of visitors who were confirmed by state legislatures. In Virginia, for example, the board made a large investment in new buildings, a library, and equipment to the college. State involvement ushered in a new dynamic of engagement. By the end of the 18th century, American colleges began to change, including the following:

- To open their doors to more students,
- To evolve from colleges to universities, and
- To develop curriculum focused on addressing community concerns (Brubacher & Rudy, 1997).

The most striking impression about this period in American college history was their ability to respond to community needs.

The first century of American colleges established the groundwork for what we now know as the university system. Institutions of higher education throughout history have continued to amend student engagement techniques, develop superior instructional curricula, and actively involve the government to increase student access (Geiger, 2011). Independently, any one of these events may not have moved the dial in American college history, but the

progression of events certainly had positive outcomes that contributed to the success of the American higher education system. A vast difference from the humble beginnings can be seen by the increase in degree-granting institutions and the student population. The American higher education system currently consists of approximately 4,700 degree-granting institutions with 21 million students (NCES, 2014).

History of Student Affairs

Early American colleges wielded authority in their role of surrogate parent to their student, a construct identified as *in loco parentis*—in place of the parent (White, 2007). The doctrine of *in loco parentis* originated in English common law and was adopted by post-secondary educational institutions, expressed as curfews, student code of conduct, and academic integrity. Under this model, the shift of power moved away from the parent to the college, with institutions acting as a surrogate parent and creating policies dedicated to the best interest of the student. The expectation of a college or university to take protective steps to safeguard students became a part of the organizational philosophy (White, 2007); student affairs was created as a function of the university, consisting of designated professionals who would specifically focus on the affairs of students and serving in such positions as Dean of Women and Dean of Men (Mann, 2010). Student affairs, rooted in a 19th century concept in higher education, expanded its function to provide co-curricular experiences for students (Geiger, 2011).

The mission of 21st-century universities and colleges is more complex than that of institutions of the past. The landscape of student affairs described by the National Association of Student Personnel Administrators (NASPA) is a diverse body of professionals that aims to

provide advocacy and learning opportunities for students. The association has approximately 15,000 members and includes student affairs professionals from all 50 states, eight US territories, and 25 countries (NASPA, 2016). The modern American university's mission includes being the generator of jobs, a stakeholder of knowledge generation through innovative research, a conduit for cultural transmission, and a vehicle for knowledge transmission. Student affairs as a division of higher education has to strike a balance of competing factions which include external accreditors, governments, the competitive marketplace, faculty, students, alums, and board members (Lowman, 2010). For the purpose of this study, the focus will be specifically on residence life as a department area in student affairs.

History of Residence Life

Growth in higher education placed pressure on administrators and faculty to provide curriculum that emphasized an “all purpose” approach to education (Brubacher & Rudy, 1997). The desire to address community needs and reduce the distinction between the haves and have-nots became more palpable. Education was viewed as a good investment; therefore, there needed to be a direct positive by-product for people to become educated.

Advancing education came in varying forms, but most notable was The Morrill Act of 1862 that proposed a financial investment to be allocated to each state. The bill was met with lots of consternation from Congress (Geiger, 2011), however, after several iterations, The Morrill Act of 1890 provided federal appropriation to new colleges, financial aid, developed a tax support structure for higher education, and included funding for southern states without discrimination (Brubacher & Rudy, 1997).

Almost a century later the federal government would again provide guidance and support to expand higher education. Title IV of the College Housing Act of 1950 provided financial assistance to colleges and universities to build large-scale housing buildings to meet the living needs of residential post World War II students (Brubacher & Rudy, 1997). Construction of these facilities to house as many students as possible gave rise to the dormitory-style housing typically associated with college residence halls today (Frederiksen, 1993).

Dormitories were found at boarding schools and colleges to house students while away from their families (Frederiksen, 1993). However, as colleges admitted more students, dormitories transitioned to residence halls and staff were hired to support students assigned to the facility. These original dormitories morphed into the form of residential colleges in early American higher education. A residential college is a facility where students and faculty live together with a focus on integrated academic and social curriculum (NCU, 1967). Over time, the residential experience grew to meet those demands along with the changing needs of the student population.

In early student affairs models, faculty and deans lived in residence halls fashioned in the *locos parentis* model. Today, the purpose of residence life staff is to provide services and support that enhance holistic student growth and development of college students (Kuh & Whitt, 1988). Residence life is described as the comprehensive program surrounding the experience of living on campus in a residence hall at a college or university (Frederiksen, 1993); residence life programs are usually structured around planned events and a code of conduct and/or ethics (CAS Standards, 2009).

Research on the college student has found a positive relationship between persistence and satisfaction of students who participate in out-of-classroom experiences (Kuh, 1995). Additionally, the out-of-classroom experiences have increased students' level of social competence, autonomy, confidence, self-awareness, and appreciation for human diversity (Baxter Magolda, 2006). While this subset of the student affairs profession carries a heavy stake in the out-of-classroom experience, there are a few challenges in studying this population, such as inconsistent job title and responsibilities (Appendix A).

Contemporary Scope of Residence Life Staff

Residential housing options are also good for students: residential students report increased commitment to classmates who are their fellow residents, creating emotional support and a culture of community (Ong et al., 2013). A 2006 study found that 30% of students lived on campus and these students were more likely to be engaged and retained at the institution (Ong et al., 2013). Similarly, Pascarella (1992) noted that students living on campus were not only more involved in the educational and social systems of the institution, but they also made significantly greater academic and interpersonal gains during college. Pascarella also found that, for students, living on campus and involvement in the educational and interpersonal systems of the institution fostered relatively greater levels of cognitive growth.

Collecting data on residential life professionals presents two challenges, both of which are associated with identifying professionals in the context of varying job requirements and job titles. The first challenge—varying job requirements—involves the issue of where the residential life professional actually lives (“live-in,” “live-on,” or “live-off” campus). Staff

members who "live-in" often are expected to respond to students and any incidents that happen in their assigned residence hall (CAS Standards, 2009). However, in some instances, a residential life position does not include the requirement to "live-on" campus or offers the staff member the flexibility to live on or off campus (Burkard et al., 2005).

The second challenge related to the collection of data on residential life professionals is rooted in the inconsistency in job titles. A review of position descriptions on the website Higheredjobs.com reveals that, while titles vary from campus to campus, job responsibilities remained constant. The researcher notes that some job announcements emphasize work experience in a relevant functional area and do not require a master's degree. For instance, in some residence life models, the hall director/resident director roles qualify as first responders and carry higher levels of intervention responsibilities, while coordinators were semi to mid-level employees and balanced both intervention and administrative responsibilities (Ojo & Thomas, 2012).

Organizational Structure

In the *2010 Census Group Quarter Report*, approximately 2.5 million students lived on college and university campuses in the United States (Census, 2011). College housing facilities include a range of functional tasks that fall to residential life staff, including facility management, maintenance, housekeeping, room assignments, billing, contracts, and residence life. As previously noted, there are several distinct areas of responsibility to the effective management of a university housing program. For the purpose of this study, residence life will be examined in terms of job responsibilities, since residence life staffs' primary responsibilities

include both administrative and programmatic roles such as educational programming, conflict resolution, student conduct, and emergency response (Hirschy, Wilson, & Braxton, 2015). Other responsibilities of full-time residence life staff include staff and student recruitment, selection, and supervision, programming, crisis response, and other administrative duties (Ojo & Thomas, 2012); the crisis response job function is one of the keys to understanding the stressful nature of this particular job.

In a 2005 Delphi study of mid and senior level administrators, residence life positions were identified as the second highest entry-level role for recent graduates into the student affairs profession (Burkard et al., 2005). The study reported entry-level positions, such as residence life, to be those that have a high degree of student contact through individual, and in some cases, group services. The high student contact was described as advisement, providing support, mentorship, and leadership development (Burkard et al., 2005). Additionally, residence life staff supports students through counseling techniques during, and after, a crisis (Kuh & Whitt, 1988). In another study, residence life professionals emerged as the backbone of student services on college campuses (Herr & Strange, 1985).

The Herr and Strange (1985) study did not include the organizational staffing structure for the residence life programs that were studied. Examples of the staffing structure would have provided additional insight into employment placement. If taken into consideration, ACUHO-I, the leading housing professional association consists of 16,000 members, therefore, the percentage breakdown of the membership would be as follows: 44% would be approximately 7,000 members, 33% is approximately 5,300 members, and 23% is approximately 3,700 residence life staff members. Survey respondents reported supervising different sizes of housing

units: 44% were responsible for small units (up to 299 residents), 33% were responsible for medium-sized units (300-599 residents), and 23% were responsible for large units (600 or more students; Herr & Strange, 1985). The organizational structure of residence life programs depends on the number of beds on-campus in student living units. The greater number of beds requires an organizational structure with additional reporting layers. The figures below are examples of common organizational structures for large, medium, and small residence life programs. Each organizational chart outlines the staff who participate in the on-call service and respond to crises.

Figure 1 provides an example of a large residence life operation. In this structure, there are opportunities for specialized job functions, such as living-learning and staff-selection coordinators. These roles allow residence life programs to address students' needs by decentralizing the duties. For instance, the living-learning coordinator focuses on the learning component of living on campus and provides targeted programs and services to students. Similarly, the staff-selection coordinator focuses on student staff recruitment to work in the residence halls. In this model, there are also more support layers responding to incidents.

While a medium-size residence life program has fewer layers (Figure 2), the function of responding to incidents can be similar to a large residence life program. In this model, tasks are shared and staff may have dual roles. Additionally, in the medium-size organizational structure, the number of beds supervised by a professional staff member appears to be smaller than that of a larger model.

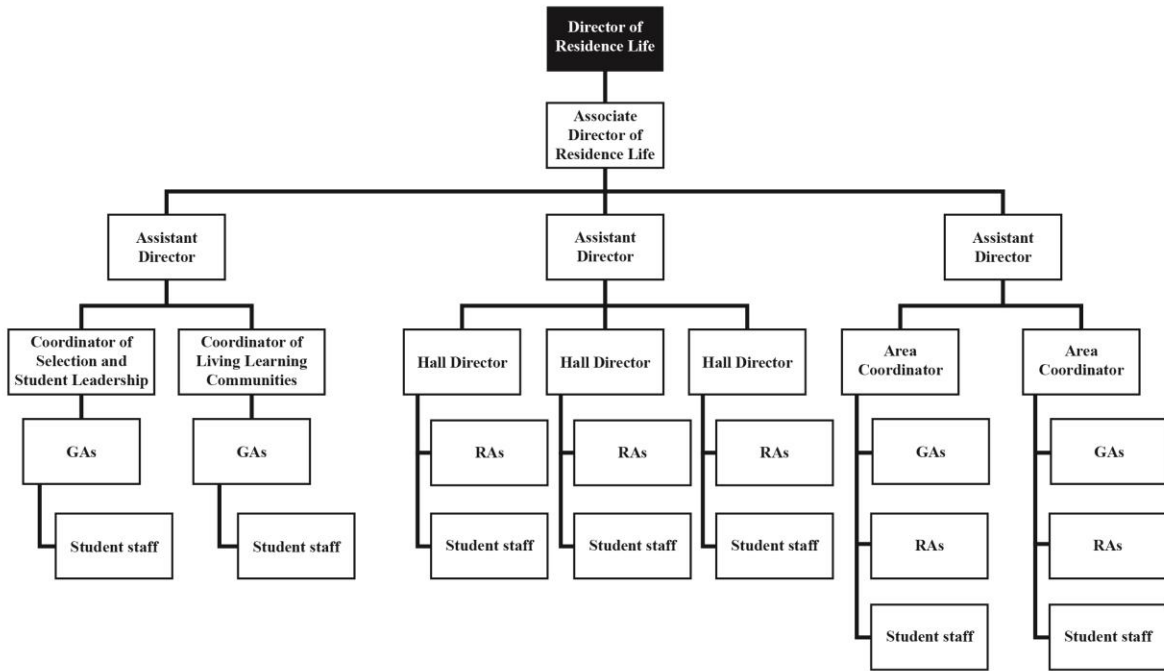


Figure 1. Example of organizational chart (large, 5000+ beds).

In the final organizational chart (Figure 3), the organizational chart is the flattest of all the structures and staff members have less supervision. In a smaller residence life program professional staff members are directly supervising resident assistants and could have several roles in order to provide functions also seen in larger on-campus facilities. It's important to note that organizational structures are not consistent and the examples provided are an attempt to capture common organizational structures based on bed counts.

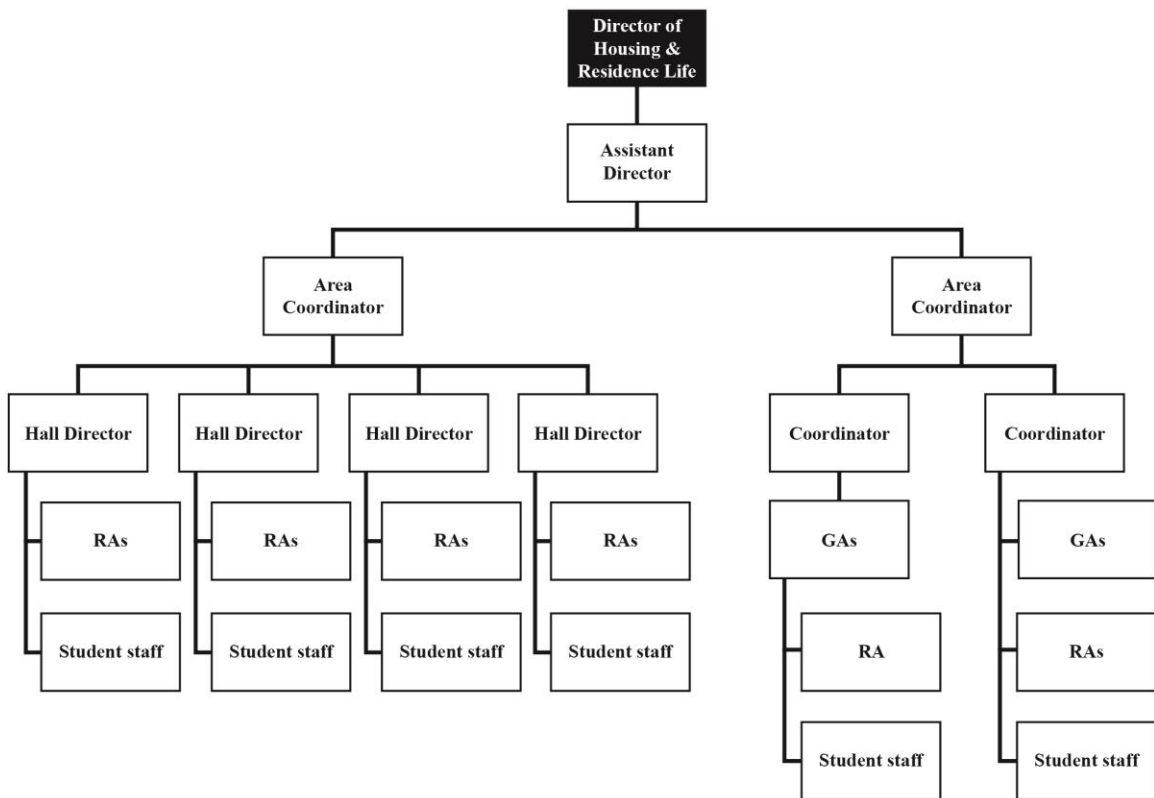


Figure 2. Example of organizational chart (medium, 2000-5000 beds).

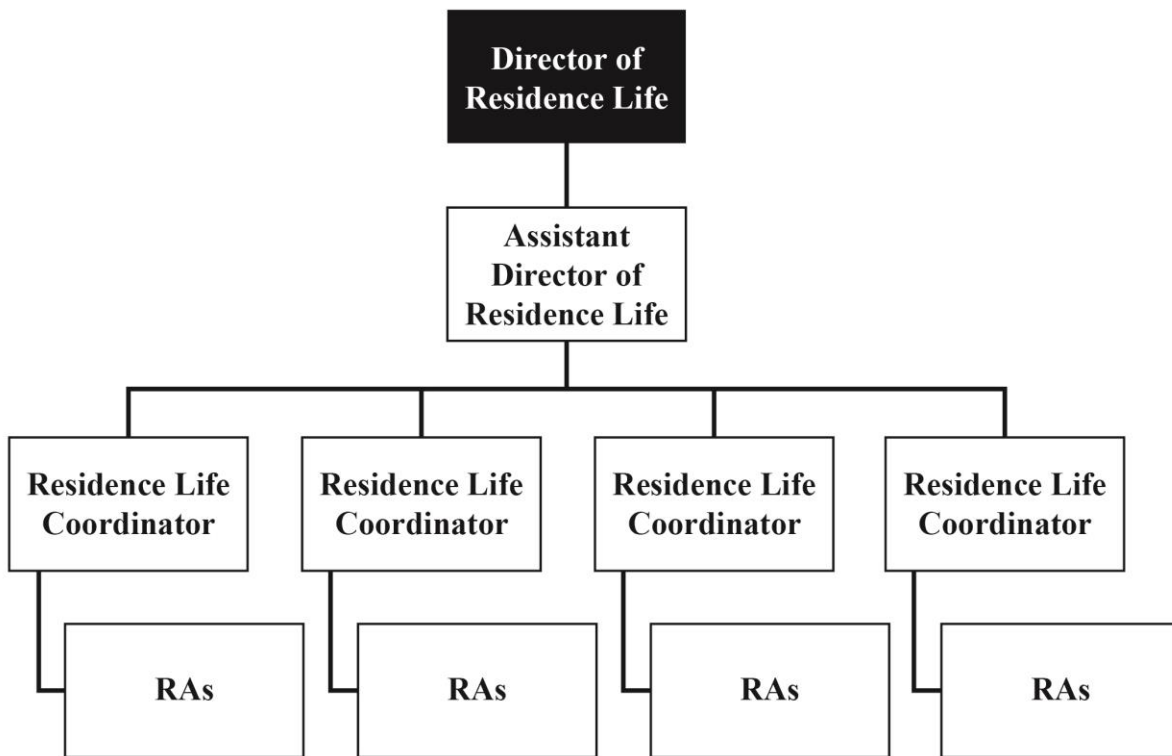


Figure 3. Example of organizational chart (small, 2000 beds or less).

To further explain the organizational charts above, Table 1 provides an overview of titles and frequent responsibilities associated with the title and educational level. The residence life staff job functions and tasks were consistent in direct contact with and responsibility for resident students (St. Onge, Ellet, & Nester, 2008). It is also important to clarify that graduate students could have similar titles and/or responsibilities. A graduate assistant is a post-graduate student (master’s level or higher) who serves in a support role in residence life housing programs.

Table 1

Job Descriptions

Title	Degree Requirements		Position Description
	Master's Degree	Bachelor's Degree; Master's Preferred	
Residence Life Coordinator	X		Supervise student staff (undergraduate and graduate) Recruitment, selection, and training of staff Manage varying amount of student beds
Community Coordinator	X		Occupancy management functions Supervise a front desk operation (students and paraprofessional)*
Area Coordinator	X		Student conduct officer Programmatic responsibilities
Complex Director	X		Facilities management Advisor for a community based student leadership organization (residential council)
Complex Coordinator	X		On call duty rotation Budget management Serve on departmental or divisional committees Collateral assignment (orientation, advising, health promotions)* Other administrative duties as assigned
Residence Director		X	Supervise student staff (undergraduate mostly) Recruitment, selection, and training of staff
Resident Director		X	Manage varying amount of student beds Occupancy management functions
Hall Director		X	Student conduct officer* Programmatic responsibilities Facilities management Advisor for a community based student leadership organization On call duty rotation Budget management

Note: Job titles with *indicates responsibility not consistent. The on call duty function appears in bold to bring attention to the job function that is the primary focus of this study.

The role of residence life is a complex exchange between administrative tasks and the health and wellbeing of students. Thus, in this section the residence life experience will be described in two job functions, organizational and task. The organizational function focuses on workplace dynamics while the task functions describe observed stressors from the literature that

may be a result of the on-call function. It's during this on-call responsibility where staff members are experiencing high levels of role ambiguity, workload dissatisfaction, and burnout.

For some students, the parameters of the campus community are perceived to be inherently safe, creating a false sense of security and thus increased susceptibility to victimization. The continuous interaction between residence life staff and students creates an environment for high stress levels and murky boundaries. Studies indicate residence life staff have high rates of burnout and exhibit high rates of job turnover due to quality of life issues and stresses associated with live-in work (Belch, Wilson, & Dunkel, 2009).

On Call Responsibilities

Student residents who live in on-campus housing have a social contract with the university to be responsible and not violate established institutional and community regulations and standards. In the case where a student violates a policy, they may face disciplinary action. In a research brief published by the Education Advisory Board, the residence life staff constituted the primary on-call response unit for residential campuses. On-call incidents include relatively minor emergencies (e.g., lock-outs, student illness, inebriation) as well as more serious incidents (e.g., accidents involving bodily harm, fighting; Ojo & Thomas, 2012). The brief also determined that the on-call responsibility escalated during the evening, making residence life staff first-responders in many cases. The research brief also noted that most institutions, but specifically institutions that participated in the research project, gave on-call responsibilities to residence life staff to preemptively identify and respond to a myriad of emergencies in the evening or after normal business hours of the institution (Ojo & Thomas, 2012).

The organizational structure of residence life staff responding to crises embraces a hierarchal approach. The resident assistants (RAs) assess an incident and then call for assistance in the form of highly trained para-professionals (i.e., graduate assistants) or full-time professionals (i.e., coordinator, hall director). The on-call organizational structure for most on-campus programs is as follows:

- RAs conduct hourly/nightly rounds by walking through the facilities and documenting facility and behavior concerns.
- If a concern is considered a policy violation or escalates into a crisis or emergency, RAs will call the next level up which could be a graduate assistant or professional (hall director or coordinator).
- The professional staff member assesses and triages the incident, and then provides recommendations to resolve the matter which may include:
 - Interpreting written policies, procedures, and expectations of the institution and community;
 - Referring students to on-campus resources (e.g., student conduct, counseling, or other student support services);
 - Serving as a liaison for varying entities such as on- or off-campus police or campus security or student affairs (i.e., dean of students or student services);
 - Conducting follow-up when necessary (i.e., scheduling follow-up meetings which could be conduct-related or general well-being checks);

- Scheduling formal disciplinary meetings to adjudicate the student conduct process; or
- Submitting informal/formal reports summarizing the incident.

The approach described above provides the opportunity for a policy assessment of violations to be decided by someone other than a student. In this regard, the response structure developed to respond to incidents is similar to the three levels of the Crisis Management Decision-Making/Response Process (Cesta, Cortellessa, & De Benedictis, 2014). The three levels of this process include practical activities, actions, and call up. The tactical level involves the decision makers who are responsible for translating policy and enforcing procedures by allocating tasks and resources down to the operational level. Finally, the strategic level is reserved for staff to identify key issues, prioritize actions, and communicate instructions for implementation to the lower levels (Cesta et al., 2014; Figure 4).

While Figure 4 tries to clearly identify residence life staff members in each decision making level, it will depend on the size of the institution. The on-call response of residence life will be the focus on the professional staff (i.e. hall directors and coordinators) indicative of the tactical level. Being the point of contact for crises both large and small causes staff (at all levels) to become the systemic shock absorber of victimization in the university environment.

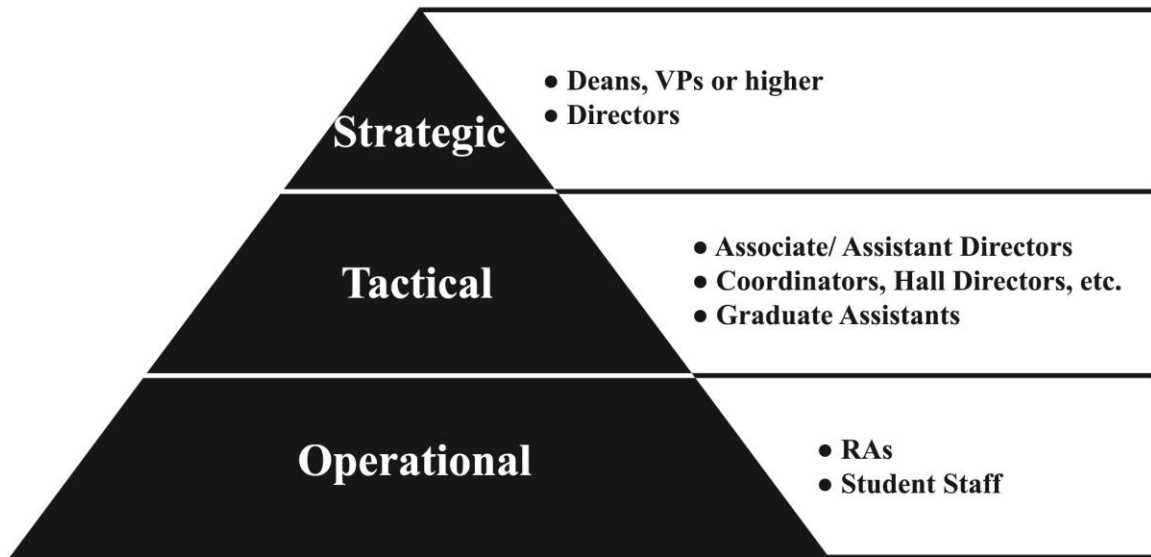


Figure 4. Crisis management levels.

Crisis Decision-Making

A core job responsibility of the residence life professional includes the on-call experience, which could appear as a minor incident that quickly escalates to a matter of health and wellbeing (Mezey, 2004). The unpredictability of housing incidents requires a residence life staff member to be nimble and rely on their training (Cesta et al., 2014). This flexibility is described through situational assessment in which a staff member determines the magnitude of a crisis, especially when there are damages involved, the availability of resources such as manpower and/or supplies, and identifies critical resources (Mezey, 2004).

An incident can be defined as a crisis if it is a high-impact event that has consequential results for those involved (McVicar, 2015). Decisions made during a crisis are especially important because they speak to the health of the organization (Walumbwa, Maidique, &

Atamanik, 2014). During a crisis, making decisions is typically framed by what to do next which is heavily predicated on the training and job expectations of the professional in charge (Higgins & Freedman, 2013). This individual assesses the crisis based on his perception of the situation; it is this relationship between the perceived seriousness of the situation and the decision-making process that determines the response (Mezey, 2004). Perception of a crisis can produce stress; therefore, stress may create a crisis perspective for one individual but not another.

There are three relevant and simple decision stressors: (a) threat of loss, (b) short time to decide, and (c) pressure to innovate in problem solving (Mezey, 2004). Decision-making during a crisis is shaped by how an individual processes the information and the need to make the correct decision (Cesta et al., 2014). This process also known as bounded rationality, which accounts for the individual's rationale in making a decision; this rationale is limited by the information they have, the time pressure to make the decision, and whether or not the optimal decision is possible (Walumbwa et al., 2014).

Work-Related Stressors

A 2004, ACUHO-I sponsored research grant was awarded to specifically investigate the recruitment and retention of entry-level professional staff. The results of this study found that the retention of live-in/off positions was a concern, specifically noting that smaller institutions were not able to retain residence life professionals (ACUHO-I, 2008). The overall findings indicated that the quality of life of residential life staff impacted staff retention. The report described several work experience measures to better explain the quality of life, which included job autonomy, burnout, role ambiguity, workload, and job satisfaction (ACUHO-I, 2008).

Residence life staff members have been noted in the literature to struggle with work-life balance because of the proximity of their work to their home (Belch & Mueller, 2003) and the challenges associated with managing boundaries specific to student friendships. One study reported that 33% of residence life professionals identified managing friendship boundaries as a concern (Rankin, 2011).

In a similar study, Belch and Mueller (2003) described the quality of life issues to include living arrangements, administrative task workload, and job burnout. Consequently, residence life staff have identified a great deal of dissatisfaction with their jobs, citing long work hours, lack of privacy, and relatively low pay for a professional with an advanced degree (Belch & Mueller, 2003). Due to these findings, residence life staff appear to be experiencing role internalization, role conflict, and role ambiguity (ACUHO-I, 2008).

Impact to Role Response

Rahim (2011) explains that roles provide a normative status for behaviors, attitudes, values, and conceptualization of the situation and a position. However, in higher education, many tasks are not completed by one single staff member; overlapping resources or areas of job responsibility can result in role conflict or ambiguity. Role conflict occurs when a person is required to perform a task that is incongruent with his role, while role ambiguity occurs when there is a lack of understanding of expectations (Rahim, 2011). Both conflict and ambiguity can result in a lack of action, confusion, or duplication of services. With shrinking budgets and limited resources in higher education, it is imperative that staff members have an opportunity to successfully offer support to students, colleagues, and the institution.

Residence life staff have been noted to perform role distancing. Role distancing is a dramaturgical concept involving the intentional decision to detach from or de-emphasize responsibilities from the role you are being required to play (Goffman, 1961). In this case, residence life staff are creating distance between the role(s) of a live-in/on/off capacity. Role distancing cements role conflict in a social structure due to the close nature of work and life and often creates incompatible expectations of maintaining professional boundaries (Everett & Loftus, 2011).

Environmental Stressors

The increase in accountability institutions have become akin to responding to numerous and sometimes conflicting demands, whether from federal, state, local, or the community. The manner in which an institution can make decisions depends on the leadership capacity that serves the larger system of higher education functions at the level of ideas and values, rather than within a defined organizational framework (Powell, Gilleland, & Pearson, 2012). Decisions cannot be resolved without bargaining and consensus. Administrator's attention must control and coordinate goals, involvement for strategic choices and problems that positively impact the organizational structure (Cohen, March, & Olsen, 1972). While simultaneously, identifying opportunities of minimal expenditures, innovative problem solving, and maintaining an acceptable level of effectiveness (Powell, Gilleland, & Pearson, 2012). Higher ranking professionals have to be politically astute and are often confronted with situations requiring them to play roles that conflict with value systems. Subsequently, a university in its large complex

structure has to continue to create bureaucratic conditions to stabilize the environment (Stevens, & Williams, 1988).

In this regard, administrators are tasked to make appropriate decisions in order to support the institution. Staffs are trained to interpret institutional mission/values and assess situations in order to respond. However, if an environment appropriate decision-making is not cultivated staff members become reluctant to make complex decisions (Komives, 1992). Staff members in some cases defer to their supervisor to avoid being incorrect. Komives (1992) found that supervisees who are not comfortable making the tough calls, results incompetence to develop professional talent which is not regenerative to the field of higher education. Thompson and Werner (1997) reported a negative relationship between role conflict and organizational effectiveness if not addressed. And a very frequent behavioral response to role conflict is withdrawal or avoidance of those who are seen as creating the conflict causing role ambiguity.

Models of Traumatization

Traditional conceptualization consists of three distinct phases: a stimulus, response, and interaction due to an event or series of events (Trenberth & Dewe, 2004). However, critics of this definition are concerned that if stress is defined too narrowly, the significance of workplace-related stress can be misrepresented. Consequently, a broader definition of stress is proposed in the literature that takes into consideration the meaning or significance that an individual gives to the event (Trenberth & Dewe, 2004). Stress is a broad psychological concept due to its link to different facets of an individual's life.

Stress can be categorized into three types: stimulus based, response based, and stressor-strain. Stimulus-based stress describes stress as a situational reaction or environmental stimuli that can influence a person (Nikolaou & Tsaousis, 2002), while a response-based stressor describes an individual's psychological or physiological response to an environmentally-based stimulus. Lastly, stressor-strain is viewed as a bilateral process where stress is both the stimuli and the response (Nikolaou & Tsaousis, 2002). Expanding the definition of stress to include the three types listed above allows for a greater understanding of how an individual may respond to a crisis.

As a result of normal work stressors, individuals can also experience emotional labor. Emotional labor requires staff to often suppress their true feelings in order to create a caring and safe atmosphere for students (Hochschild, 2003; Karimi et al., 2013). Engaging in emotional labor is almost unavoidable due to the nature of work in residence life and can cause emotional dissonance in staff members.

Emotional dissonance occurs when role expectations pertaining to outward emotional expression conflict with inner feelings (Julian, 2008). Emotional dissonance can also be viewed as an individual's commitment to the organization that binds him to specific beliefs or values that may differ from their own beliefs or values (Nikolaou & Tsaousis, 2002). This reaction occurs when expressed emotions satisfy role expectations but clash with inner feelings (Julian, 2008).

Hochschild (2003) describes the exchange of emotional labor and dissonance as dramaturgy of emotional management requiring individuals to become actors on both the surface level and at a deep level emotionally. At the surface-acting level, an individual exhibits emotions required for the job but may not feel an emotional response to the situation; deep-

acting individuals exert more effort and start to believe the emotion. Both levels of acting are cautioned against as having possible negative consequences to work performance.

Consequently, a residence life professional is simultaneously trying to assist a student with the expectations of his role, though achieving the role may activate emotional dissonance while balancing the consequence of not performing the role successfully.

The balancing act of surface-level and deep-level response can be stressful, especially when coupled with the extreme demands of residence life. These demands may include responding to campus threats such as natural disaster, suicidal ideation, sexual assaults, or physical/emotional violence. In 2011, over 30,400 criminal incidents occurred on both two-year and four-year college campuses that were reported to police or security agencies (NCES, 2012). These traumatic events can impact staff members' roles and mental health due to the exposure to trauma (Canfield, 2005). Understanding the prevalence and complexity of psychological trauma due to the work environment is a growing area of research (Miller, 2001).

Conceptualizing trauma from the professional's perspective requires the understanding of similarities and differences of three psychological after-effects: vicarious trauma, compassion fatigue, and secondary traumatic stress. These after-effect concepts are linked to the intersection of human behavior, the social environment, and influence of career trajectories (Maslach & Florian, 1988). These three trauma consequences are identified in the literature as common outcomes that occur after assisting an individual who experienced trauma. The continued exposure to traumatic events eventually has an impact on the professional's cognitive schema (Cunningham, 2004). Consequently, the notion of primary and secondary trauma is important to further explore for any helping profession. The nature of trauma has a profound impact on the

individual and society. The link between an individual's ability to adapt poses a complex interconnectedness to work and life (Miller, 2001).

The current body of trauma research is heavily focused on post-traumatic stress disorder (PTSD), which is defined by the American Psychiatric Association (APA) as an anxiety that develops in some individuals after experiencing extremely traumatic events, such as combat, crime, an accident, or a natural disaster (2014). This definition may be the result of APA's recognition of PTSD as a diagnosable disorder, which is typically diagnosed by a trained clinician (APA, 2014). Subsequently, the literature provides several stress related disorders/concepts that were currently not mentioned in the APA Diagnostic and Statistical Manual of Mental Disorders 5th edition (DSM-5), but these disorders have similar symptoms and descriptions to PTSD under the Dissociative Subtypes category. While PTSD symptoms have been broadened in the most recent DSM-5, the manual does not cover all stress related disorders/concepts for clinicians to diagnose individuals sooner.

As seen below in Table 2, the after-effects have similar definitions to the challenges one may experience after experiencing a trauma. Thus the engagement of emotional responses occurs after the stimuli i.e. the traumatic event occurs.

Processing Trauma Experiences and Symptomatology

It is very difficult to measure the complex response to exposure to a traumatic event, or a series of event's impact to cognitive development (Spranget et al., 2007). There were several multi-layered responses created based on the individuals' previous experiences, background

training and view of the world. However, researchers understand that a person's response to trauma is embedded in the sociocultural context (Saakvitne et al., 1998).

Table 2

Models of Traumatization

Model of Transformation	Definition
Secondary Traumatic Stress (STS)	<i>Secondary Traumatic Stress</i> is the recognition of challenges working with individuals who have experienced trauma. It is the direct result of continually hearing difficult or appalling information (Canfield, 2005). Additionally, STS results from the desire to want to help the individual experiencing the trauma (Figley, 2002).
Vicarious Trauma (VT)	Vicarious Trauma can be defined as a concern among “helping professionals” who work with individuals who experienced trauma. Vicarious trauma revealed the potential for adverse and long-term effects on mental health, relationships, and work performance (McCann, & Pearlman, 1990). Vicarious trauma involves affective distress and shifts in cognitive schemas following secondary exposure to traumatic material for instance responding to an active shooter or sexual assault (Aparicio, Michalopoulos, & Unick, 2013).
Burnout (BO)	<i>Burnout</i> can be defined as a state of physical, emotional, psychological and spiritual exhaustion resulting from chronic exposure to populations that are vulnerable or suffering. The process of burn out is a progressive state occurring cumulatively over time with contributing factors related to both the individual and the population being served (Newell & MacNeil, 2010). Burnout refers to the psychological strain of work with traumatized populations; it is a state of physical, emotional, psychological and spiritual exhaustion (Maslach & Florian, 1988).
Compassion Fatigue (CF)	Compassion Fatigue can be defined as “risking exposure to vicarious trauma is an inherent part of the process of working with traumatized persons” (Sprang, Clark, & Whitt-Woosley, 2007, p. 259). CF is referred to the risk a professional will take to assist a victim. CF can be understood as a continuum of responses beginning with compassion satisfaction to compassion stress which ultimately ends in compassion fatigue (Hopkins & Goss, 2013).
Post Traumatic Stress Disorder (PTSD)	PTSD may develop after a person is exposed to one or more traumatic events, such as sexual assault, warfare, serious injury, or threats to imminent death. It is important to note most people having experienced a traumatizing event may not develop PTSD (APA, 2013).

On the other hand, acute stress and post-traumatic stress disorder (PTSD) did not have normal reactions and responses to life stressors. Conversely, non-pathological and adjustment disorder-level reactions can be experienced in response to various kinds of stressors, acute and post-traumatic stress disorders only occurred in reaction to extreme stressors (APA, 2014).

Physical stress reactions may manifest physiologically such as experiencing a rapid heart rate, weakness, or tension. Additionally, stress reactions could be expressed as cognitively slowed thought process, confusion, or poor concentration, or stress reactions can be, expressed affectively in fear, worry, panic, anger; or behaviorally by withdrawal, hyper-vigilance, changes in interpersonal relationships, or even changes in substance use (Schwitzer, 2004).

Harris (1995) suggests preparing professionals to confront the aftereffects of work and has identified three phases of trauma work experience:

1. Phase 1: confront feelings of trauma,
2. Phase 2: define stress symptoms over extended period of time and
3. Phase 3: assimilate the experience into work.

Having an understanding of these phases can help move the professional to emotional stability. Even though Harris has provided an experiential model for helping professionals, the literature suggests more research be conducted to having a broader understanding of cognitive shifts (Sprang et al., 2007).

There were striking similarities to the after-effects in how an individual experiences the trauma. The symptomology often can impact an individual's ability to sleep and mental health; with the onset of depression or depressive mood (Table 3). The overlap of symptomology requires researchers to be careful with how experiencing trauma is discussed. The similarities

could create confusion and impact treatment. As seen in the concept map, there is a link between burnout, vicarious trauma, PTSD, and secondary traumatic stress, but the nuances of the stress related response is pertinent to future research (Table 2).

This study will focus on vicarious trauma because of the continued exposure to traumatic events of residence life staff members. The American Counseling Association (ACA) defines vicarious trauma as the tension and preoccupation of the stories/trauma experiences described by the victim (ACA, 2011). The tension is associated with the “cost of caring” for others (Figley, 2002). American Counseling Association (2011) states that workers who were exposed to trauma vicariously sometimes exhibit the following symptoms: difficulty talking about their own feelings, unexplained anger or irritation, diminished joy towards interests, e.g., hobbies, loss of sleep due to persistent thinking of the victim, forgetfulness, worried not doing enough in the job, a sense of hopelessness, or blaming others.

The ACA (2011) cautions workers not to confuse vicarious trauma with burnout as burnout happens over time and can be addressed with taking time off from work (Figure 5). Vicarious trauma, however, can be a persistent state of arousal, and an impact the staff member’s personal life, relationships with friends and family, and mental and emotional health. Vicarious trauma is pervasive and if not addressed can increase stress levels (McCann & Pearlmann, 1990).

Table 3

Symptomology

Emotional/Mental/Physical Responses	CF	STS	PTSD	VT	BO
Exhaustion (physical, emotional or mental)	x	x		x	x
Insomnia	x		x	x	
Headaches	x			x	
Increased susceptibility to illness, gastrointestinal problems and recurrent colds	x	x		x	
Hypochondria	x			x	
Anger and Irritability	x	x		x	
Negative self-image	x			x	
Depression	x		x	x	
Reduced ability to feel sympathy, empathy, apathy	x			x	x
Cynicism	x	x		x	
Resentment	x			x	
Disruption of world view/heightened anxiety or irrational fears	x			x	
Intrusive imagery	x	x	x	x	
Hypersensitivity to emotionally charged stimuli	x		x	x	
Loss of hope	x	x		x	
Excessive blaming	x				
Bottled up emotions	x				
Outbreaks of aggressive behaviors	x		x		
Nightmares	x		x		
Flashback		x			
Mistrust of others					
Poor self-care	x	x			
Problems in personal relationships, intimacy	x			x	
Alcohol or drug used (increased)	x		x	x	

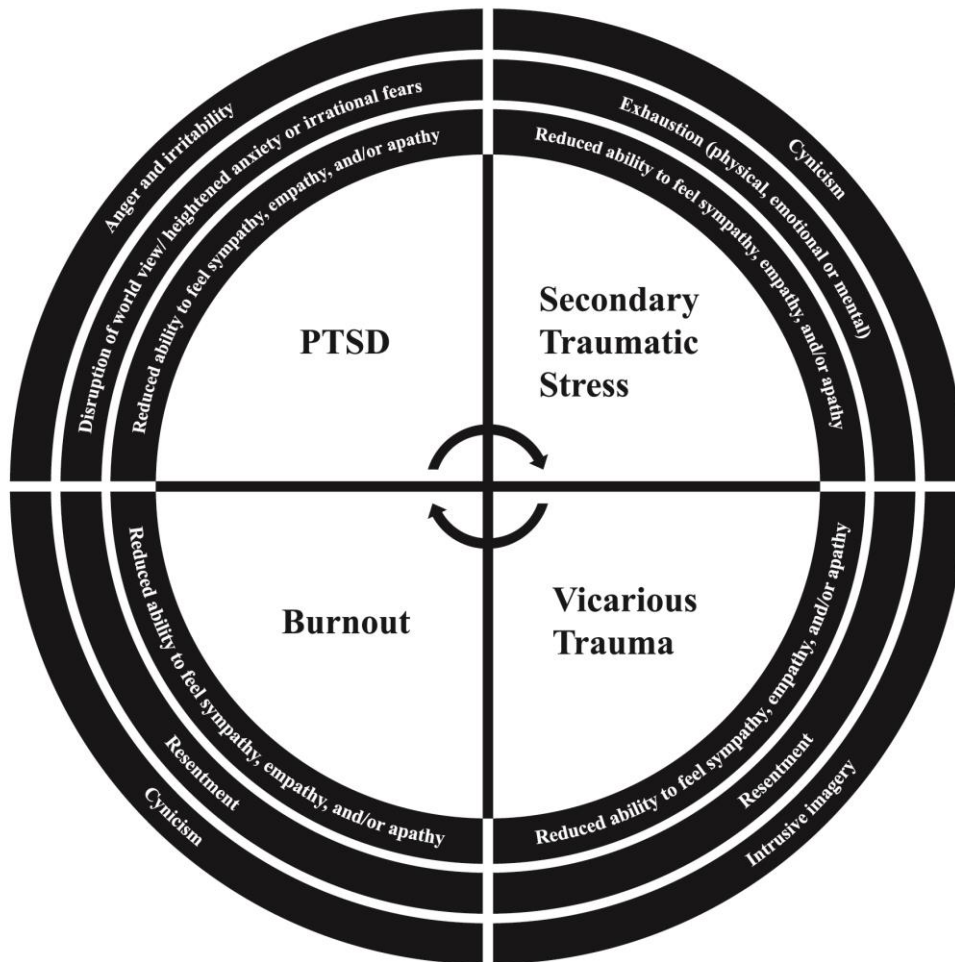


Figure 5. Symptomology similarities. Copyright 2016 by L. S. Hodge.

Vicarious Trauma

Vicarious trauma is identified as a concern among “helping professionals” who work with individuals who have experienced trauma. Vicarious trauma revealed the potential for adverse and long-term effects on mental health, relationships, and work performance (McCann & Pearlman, 1990). Vicarious trauma involves affective distress and shifts in cognitive schemas

following secondary exposure to traumatic material (e.g., responding to an active shooter or sexual assault; Aparicio et al., 2013).

Vicarious trauma is associated with symptoms similar to those of posttraumatic stress disorder. An individual may sometimes re-experience the details or avoid the traumatic exposure that involves cognitive shifts. The staff member's frame of reference therefore experiences disturbances in his/her identity, spirituality, and worldview, as well as changes in self-perception, ego resources, and psychological needs (Canfield, 2005). Vicarious trauma is a theoretical secondary traumatization that attempts to explain the change in empathetic engagement of a professional who works with victims (McCann, & Pearlman, 1990). In this study, victims will be identified as students in college-higher education system. Understanding vicarious trauma can be complex for numerous reasons, one of which is that vicarious trauma is not classified as diagnosable mental health disorder in the American Psychiatric Association DSM-5. The DSM-5 provides mental health providers (counselors and psychologists) with a set of criteria to identify symptomology to be addressed through treatment. Vicarious trauma, within this diagnostic tool, is not classified and can go unidentified if a professional is not aware of the change.

Additionally, while vicarious trauma is not a diagnosable mental health concern, it does exhibit characteristics similar to PTSD. The symptomology includes intrusive memories, lack of sleep, heightened arousal (i.e. anger, avoidance, or nightmares; Canfield, 2005). Vicarious trauma, moreover, has been synonymous with other traumatization models such as secondary traumatic stress, compassion fatigue, and burnout (McCann, & Pearlman, 1990). It is important to acknowledge that while there were similarities in the concepts, there were also differences.

Understanding the difference between the traumatization models gives more context to the importance for further investigation on the phenomenon specifically as it relates to the higher education setting.

Research indicates the pervasiveness of vicarious trauma is still unclear as to how it occurs and to what extent it impacts professionals (McCann, & Pearlman, 1990). However, the occurrence of cognitive shifts overtime for professionals who work certain environments indicates the need to better understand vicarious trauma. Vicarious traumatization (VT) is the cumulative transformative effect, upon helping professionals, resulting from empathic engagement with traumatized individuals (Aparicio et al., 2013). Vicarious trauma encompasses changes in the experiences of self, others and understanding the world; the feeling is pervasive concerning the person's identity, psychological needs, beliefs, and memory system (McCann & Pearlman, 1990). The professional often experiences a deep sense of isolation from others because of the trauma.

Vicarious trauma results from the interplay of the personality of the professional, work environment and information processing (Cunningham, 2004). Consequently, the notion of primary and secondary trauma is important to further explore for any helping profession; however, the current literature primarily is focused on mental health and social work. Therefore, there is a gap in the research for the impact of residence life staff.

Residence life staff's primary purpose is supporting students to be successful. As residence life members engage students through explaining institutional expectations they become privy to student lives. Consequently, in the process of supporting students sharing about their traumatic experience, staff members often utilize micro-counseling techniques to offer

guidance (Wilson, 2010). This strategy requires utilizing listening, paraphrasing and reflecting feelings of students, an indication of the helping skills most professionals believe was a valuable competency. In *The High Risk College Student*, Hollingsworth, Dunkle, and Douce (2009) suggest student affairs professionals should be able to recognize and document student behavior for appropriate referrals. What does this mean? It means that in addition to supporting students, the residence life staff member becomes at risk for vicarious trauma.

Traumatization research has provided context to an otherwise complex transaction between a traumatic experience and the response to the event (Lazarus, 2000). Ideally, by understanding how these psychological schemas impact professionals, the field can provide support through training and education to better prepare staff (Hollingsworth et al., 2009). One of the variables that may explain different potential coping mechanism and to provide assistance is discussing emotional competence with the residence life staff member is emotional intelligence.

Emotional Intelligence

For the purpose of this study emotional intelligence is defined as the ability to monitor one's own and other people's emotions, to discriminate between different emotions and label them appropriately and to use emotional information to guide thinking and behavior (Salovey & Mayer, 1990). Emotional intelligence, as defined by the Bar-On model, is interrelated emotional, social competencies and skills that drive human performance effectively through the use of intelligent behavior (Bar-On, 1997).

Emotional intelligence has been found to affect work attitudes, increase altruistic outlook, enhance work outcomes, and reduce interpersonal conflicts and work stress (Carmeli, 2003). Consequently, if an individual is able to perceive their environment and adapt to stress stimuli, the individual may be able to solve problems and/or make decision as they arise (Kumar & Iyer, 2012). A historical review indicates emotional intelligence has been translated into three models: (a) the Salovey Mayer model, (b) Goleman model, and (c) the Bar-On model (Di Fabio, Palazzeschi, & Bar-On, 2012). Table 4 provides a quick overview of each model and instrument used to identify an individual's emotional intelligence.

The Goleman model similarly views emotional intelligence as a wide range of competencies and skills that drive human performance. In this model, emotional intelligence is viewed through five components of self and social-awareness; self-regulation-the ability to control or redirect disruptive impulses, internal motivation-the desire to work beyond money, recognition, or status, empathy-the ability to discern others' experience, and finally social skills-effectively managing relationships (Goleman, 1998). The Goleman model stresses awareness is paramount to an individual's ability to monitor their emotional state and simultaneously successfully identify the other's emotional state (Goleman, 1998).

Emotional intelligence, as defined by the Salovey-Mayer model, is the ability to monitor one's own and other's emotions, to differentiate between concurrent emotions and to appropriately use emotional information to guide thinking and behavior (Salovey & Mayer, 1990). The emotional intelligence model is composed of four emotional competencies to formulate an individual's emotional IQ or EQ:

- Accurately perceiving emotions in one's self and others—emotional perception;

- Using emotions to facilitate thinking—emotional facilitation;
- Understanding emotions, emotional language, and signals conveyed by emotions—emotional understanding; and
- Managing emotions to attain specific goals—emotional management (Farh & Seo, 2012, p. 891).

Table 4

Emotional Intelligence Model Comparison

Model	Descriptor	Inventory Scale Measurements
Goleman’s Model	Mixed- as a wide range of skills and competencies that powers one’s leadership skills	Emotional and social competence inventory—assesses the emotional and social competence of leaders (Goleman, 1998).
Salovey &Mayer’s Model	Ability- views emotions as a rich source of data or information that help one to make sense and navigate one’s social environment	Mayer & Salovey-Caruso (MSCEIT) an ability-based test to measure perceiving emotions, facilitating thought, understanding emotions, and managing emotions (Salovey & Mayer, 1990).
Bar-On’s Model	Trait- individual’s self-perceptions of their emotional skills or abilities	Bar-on Emotional Quotient Inventory (EQ-i) measures emotional-social intelligence (Bar-On, 1997).
Genos EI Model	Genos EI model *The inventory that will be used in this study will be the Genos Emotional Intelligence Inventory which specifically identifies emotional intelligent workplace behavior and has similar reliability as the Bar-on EQ-I (Palmer, Stough, Harmer, & Gignac, 2009).	Emotional self-awareness is the skill of perceiving and understanding one’s own emotions. Feelings influence decisions, behavior and performance. Leaders who are emotionally self-aware are conscious of the role their feelings can play in these areas and are better equipped to manage this influence effectively (Gignac, 2008).

Lastly, emotional intelligence as defined by the Bar-On model is interrelated emotional and social competencies and skills that drive human performance effectively through the use of intelligent behavior (Bar-On, 1997). The Bar-On model supports effective adaptation, emotional awareness and expression as key components to emotional intelligence. Thus, an individual can

bring awareness to his/her ability to identify, assess, manage, and control self-reactions to self and to others especially in a demanding work environment (Bar-On, 2002). Bar-On (2006) found that emotional intelligence had a significantly high relationship with occupational performance.

Bar-On (2006) found that emotional intelligence had a significantly high relationship with occupational performance. In a summarization of studies, Bar-on found emotional intelligence to contribute to self-awareness and acceptance, empathy or the ability to be aware of others' feelings, manage emotions, the ability to perceive a situation realistically, and, lastly, the ability to be positive and optimistic about outcomes. These attributes (Figure 6) were connected to human behavior through the emotional regulation process (e.g., appraisal and suppression) and activating one's emotional intelligence (effective emotional assessment).

Similarly, emotional intelligence can be defined in the job framework through the adoption of trait activation. Trait activation gives a person an opportunity to consider organizational context, cues, and appropriate behavior to resolve an issue (Farh & Seo, 2012). This ability to assess job context is seen as a positive attribute to impact work performance. The necessity to assess job context and cues provides opportunities to effectively manage job demands while decreasing distractors (Farh & Seo, 2012).

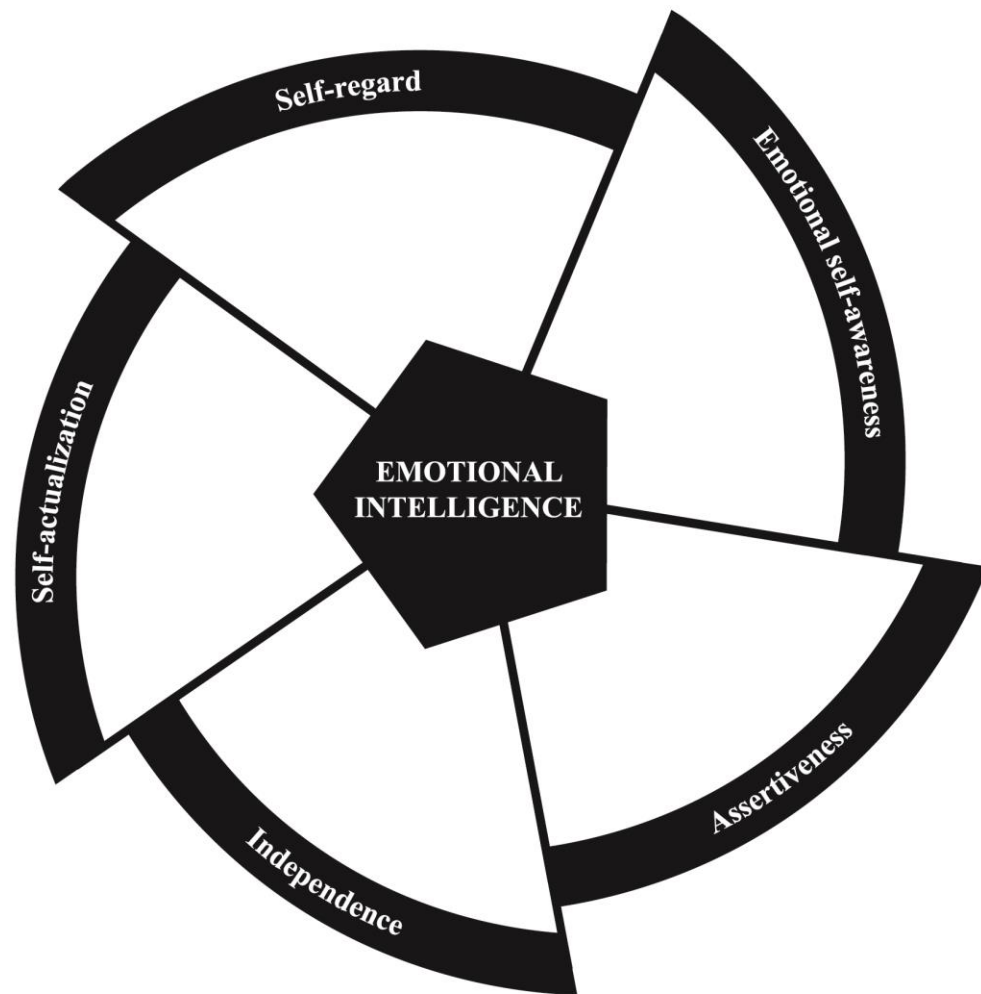


Figure 6. Bar-On emotional intelligence adapted from the Bar-on model. Copyright 2016 by L. S. Hodge.

Emotional Processing

How an individual processes his/her emotions matters because it has been linked to well-being as it relates to a psychological defense (Gross, 2002). Emotions require a great deal of meaning analysis with coordinated sets of behaviors and response tendencies to react to

perceived challenges and opportunities. This process of meaning analysis can be referred to as emotional regulation. Emotional regulation is the process by which an individual influences emotions they have, when they have them, and how they are experienced and expressed (Gross, 1998). The process of emotional regulation is dynamic because of the multi-componential progression that changes over time (Thompson, 1997). Thus emotional regulation refers to the process by which an individual modifies his/her response; emotional regulation serves to influence the type of response, intensity and quality of the response (Pena-Sarrionandia, Mikolajczak, & Gross, 2015).

It is important to note that emotion management and regulation can be influenced by culture and researchers should be cautioned not to generalize. However, the emotional regulation process the literature seeks to better explain is defined as how individuals interpret and assess information. Because of the individualized experience, emotion regulation is both motivated intrinsically/intrapersonally and extrinsically/interpersonally. The process is occurring concurrently as the individual tries to regulate goals, process social norms, or interpret long-term adaptive consequences (Gross, 2002). Thus, the process is focused on how a person can effectively manage his/her emotions.

During the emotional regulation process, an individual is rapidly trying to identify if the emotional experience, expression, or physiology must be increased, maintained, or decreased (Pena-Sarrionandia et al., 2015). The intensity level of the response is immediate, simultaneous, and on-going mental processing. The process occurs in milliseconds on a micro-level at five points; situation selection, selection modification, attention deployment, cognitive change, and, finally response modulation (Pena-Sarrionandia et al., 2015). Figure 7 is an example of the

emotional processing of a residence life staff member when responding to an incident. The initial stimuli of the incident and the subsequent exposure to vicarious trauma, emotional intelligence need to cope with the collective consequences of previous trauma, with the result of impact to job satisfaction.

Emotional stimuli can impact an individual both positively and negatively. The emotional processing relies on cognitive resources such as memory, but can be interrupted stressful stimuli. The phonological loop supports brain activity in the amygdala and occipito-temporal during emotional processing to store verbal information (Caparos & Blanchette, 2014). The amygdala is the area of the brain that plays a central role in emotional processing (Krause-Utz e. al., 2014). The phonological loop is the central concept in the working memory where the brain is trying to store of mainly verbal information through information processing (Caparos & Blanchette, 2014). Accordingly, exposure to trauma presents an opportunity to alter an individual's ability to process information and memory (Caparos & Blanchette, 2014).

The cognitive change will be the central focus while cognitive change describes the transformation in a person's way of thinking in order to alter the way they feel. This change can occur automatically or through effort, but it impacts how a person thinks or their capacity to manage demands (Pena-Sarrionandia et al., 2015). And, through cognitive strategies a person is able to shift attention to crucial information and minimize distractions (Krause-Utz et al., 2014). The cognitive change transformation occurs through appraisal or suppression.

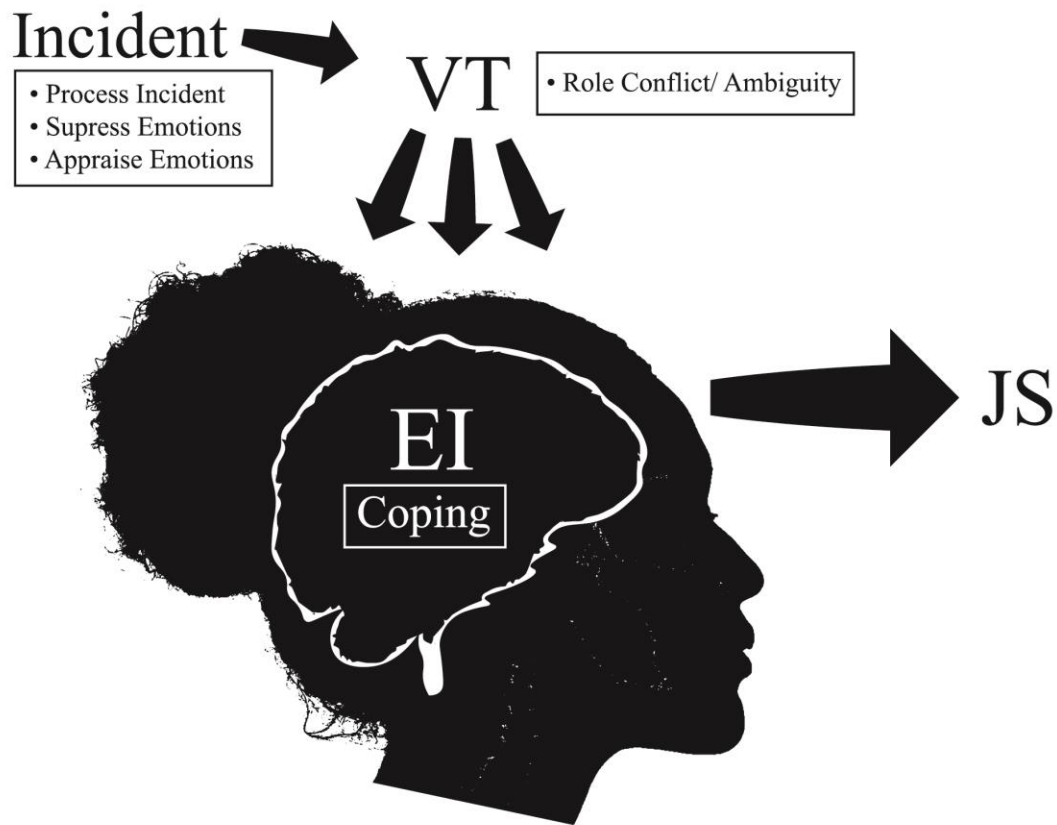


Figure 7. Emotional processing of residence life. Copyright 2016 by L. S. Hodge.

Appraisal, broadly viewed in cognitive change, has four forms; self-efficacy, challenge/threat, positive reappraisal, and acceptance (Pena-Sarrionandia et al., 2015). Self-efficacy appraisal captures a person’s confidence to handle the situation (Bandura, 1997). Challenge and threat appraisal refers to perceived difficulties in a situation; the evaluation of the threat and the challenge of gains and losses (Lazarus & Folkman, 1984). Positive reappraisal refers to an individual’s ability to look at the silver lining (Pena-Sarrionandia et al., 2015). And

finally, acceptance refers to the conceding to the situation in order to deal with the impact.

Acceptance is noted as being a protective psychological and physical response (Gross, 2002).

Conversely, suppression requires self-monitoring and self-corrective action throughout the situation. Unlike appraisal suppression requires continued cognitive resources (Gross, 2002). To further understand cognitive schema changes in emotional responses, the research suggests examination of emotional competence. Emotional competence will be explored through the framework of emotional intelligence and regulation. The literature suggests supervisors should be aware of an individual's emotional intelligence being positively correlated to work performance that is a function of job satisfaction.

Job Satisfaction

The initial introduction of job satisfaction discussed the concept in terms of job attitudes (Locke, 1969). Additional investigation improved the definition to be a pleasurable or positive emotional state resulting from the appraisal of one's job or job experiences (Locke, 1976). Both definitions were met with criticism, suggesting the both definitions were not measurable, and could not answer the relationship or correlation of job satisfaction (Locke, 1979). For the purpose of this study, job satisfaction will be defined as a complex emotional reaction to work that will require an employee's cognition, evaluation, and regulation of work tasks, which results from the perception that one's job fulfills important job values (Henne & Locke, 1985; Locke, 1969).

Subsequently, if the above parameters of job satisfaction are defined as the above, this definition then becomes an organizational behavior/function. Organizational behavior studies

the impact of human behavior within organizations. A thoughtful exploration of job satisfaction could better explain the concerns presented in the 2004 ACUHO-I report such as attrition, burnout, organizational commitment, of residence life staff.

Job satisfaction refers to an individual and his/her job situation, whereas employee morale focuses more on how an employee relates to a sense of common (or group) purpose within an organization. Secondly, job satisfaction more appropriately addresses past and present situations, while morale addresses feelings about the future (Locke, 1976). There was several work performance outcomes associated with job satisfaction that are important such as turnover, stress, and job involvement (Macdonald & MacIntyre, 1997). Additionally, job satisfaction has been identified as an indicator for an individual's mental wellbeing and has significance to job performance (Vanden Berghe, 2011).

Utilizing job satisfaction as a variable was a key variable in several studies that found a casual directional relationship with job satisfaction and job performance. Job performance is defined as all behaviors employees engage in, or contribute positively at work, or, more specifically, how well someone performs his/her work (Jex, 2008). One such study conducted by Shore and Martin (1989), found a connection with job satisfaction as a predictor of job performance. Additionally, job satisfaction provides three components to further explain an individual's work experience: cognitive, affective, and behavioral (Vanden Berghe, 2011).

Specifically, the cognitive component provides further evidence of the need to understand the relationship between vicarious trauma, emotional intelligence, and job satisfaction. The cognitive component represents perceptions, beliefs and expectations regarding the organization in order to succeed in the job (Vanden Berghe, 2011). Thus, this component focuses on the

experience of the job, which is the crux of understanding a residence life staff member's experience after being exposed to vicarious trauma.

The research suggests job satisfaction is related to emotional intelligence because of the relationship to emotional labor, stress, and awareness (Hochschild, 2003). It was found that job satisfaction partially mediated the relationship of work performance and emotional intelligence (Greenidge et al., 2014). Job satisfaction was defined in this study as a multidimensional psychological response to an individual's job/role, and the cognitive (evaluative), affective (or emotional), and behavioral components while in the role (Hulin & Judge, 2003).

Whereas, work performance was defined as an evaluation process where a person is assessed on how well he/she does the job (Campbell, McCloy, Oppler, & Sager 1993). Therefore, residence life programs should be aware that decreased job satisfaction could impact the quality of student engagement and work performance (Hulin & Judge, 2003).

Teacher job satisfaction is an area that continues to yield a compelling argument to better this employee group experience. In a study conducted of 200 Chinese high school teachers it was found that emotional intelligence was a moderating factor for job satisfaction (Gao, Shi, Niu, & Wang, 2013). The study found that threats to resources were evaluated differently and depended on the individual emotional regulation of the teacher. This study also utilized the conservation of resource theory to explain the stress, and how teachers strived to obtain, retain, protect and foster valued resources (Gao et al., 2013). Stress in many cases was viewed as a threat to resource loss, actual resource loss or gained resource did not meet the resources invested. Thus it was found that there was a relationship between job satisfaction and higher levels of emotional intelligence.

In another teacher job satisfaction study, it was found there was a relationship between job satisfaction, emotional intelligence, and organizational commitment. In this study teachers with high emotional intelligence were able to recognize, manage, and use their emotions to navigate challenges to their work (Anari, 2011). This study provided further support of previous teacher studies highlighting that fact that teachers with high emotional intelligence were more likely to be successful at work that was related to their job satisfaction. Consequently, it was discussed that teachers with high emotional intelligence had less occupational stress and were more effective (Anari, 2011).

A review of the literature found that job satisfaction of student affairs was closely related to supervision. In one study it was found that there was a positive significant correlation between perceived levels of supervision received and job satisfaction for new professionals (Tull, 2006). The supervision experience was found to counter role ambiguity, role conflict, role orientation, role stress, job burnout, work overload, and perceived opportunities for goal attainment, professional development, and career advancement (Berwick, 1992; Belch, Wilson & Dunkel, 2009).

Conversely, another study of job satisfaction of student affairs professionals, found there was a closer relationship to the lack of professional mobility and underemployment as the reason for low levels of job satisfaction (Bender, 2009). This study was able to discuss the relationship between job satisfaction and job performance. “The individual’s performance must be closely examined to ascertain whether or not individuals are doing the best job of which they are capable” (Bender, 2009, p. 554).

The individual's performance was viewed through the lens of job security, salary, fringe benefits, institutional flexibility, and involvement in decision-making. Additionally, this study explored the degree of fit between organizational demands and individual needs may be further dependent on the individual's perceptions (Bender, 2009). It was found that job satisfaction improved job performance, as respondents reported a willingness to spend additional time on the job, initiate new projects, and there were low levels of absenteeism (Bender, 2009).

In a similar study of mid-level student affairs professionals, the results were similar. Job satisfaction was impacted by work life and behavior, nature of their role, and limited opportunity for career growth and advancement opportunities (Rosser & Javinar, 2003). The results indicated student affairs professionals and institutional work life had a direct and significant impact on both their satisfaction and morale (Rosser & Javinar, 2003). This study's premise was devised from a previous study that also explored student affairs job satisfaction. In that study it was found that the morale of new professionals was enhanced when their expected level of decision-making autonomy increased (Berwick, 1992). In this regard the important moderator was work life balance. While the results of studies may vary, it does appear that there is relationship between job satisfaction and a mediating variable. In some cases the variable was identified as the employee's emotional intelligence, supervisory experience, or organizational commitment. These studies help create the framework to discuss the employee experience and the impact to work performance.

Investigating job satisfaction of residence life professionals indicates troubling findings. As mentioned previously, the ACUHO-I (2011) study found that residence life staff professionals experienced low levels of job satisfaction due to workload, role ambiguity, and

burnout (Ong et al., 2013). This study seeks to further add to the literature specifically looking at job satisfaction as it relates to exposure to vicarious trauma and the staff members, emotional intelligence. Findings from this study could help better explain attrition rates, recruitment/retention, and turnover rates in residence life programs nationally. This phenomenon can be described through role internalization, role ambiguity, and role conflict.

Role internalization occurs when an individual incorporates the values and attitudes of the organization, which then becomes the individual's guiding principle (Julian, 2008). The internalization process becomes the individual's propensity to try to satisfy an entity (i.e. student or university/college) is central to proper accomplishment of the job (Brown et al., 2002). Additionally, it was found that in organizations that were able to activate individual's role internalization, the individual was able to behave in consistent with his/her role. This activation was found produce behaviors that were evaluated positively (Farh, Seo, & Tesluk, 2012). Thus, one can infer emotional competence can predict job outcomes, specifically satisfaction and performance.

The conflict then becomes a myriad of role ambiguity, role conflict or even role underload/overload. Rahim (2011) defines role conflict as occurring when a role occupant is required to perform two or more roles that present incongruent, contradictory, or even mutually exclusive activities. Role conflict can be further defined in four types of conflict: (a) intrasender conflict, (b) intersender conflict, (c) interrole conflict, and (d) intrarole conflict.

Intrasender conflict occurs when a role sender requires a role receiver to perform contradictory or inconsistent roles. Intersender conflict occurs when the role behavior demanded by one role sender is incongruent with the role behavior demanded by another role sender.

Interrole conflict occurs when an individual occupies two or more roles whose expectations are inconsistent. Intrarole (person-role) conflict can occur when the role requirements are incongruent with the focal person's attitudes, values, and professional behavior (Rahim, 2011).

Therefore, role ambiguity occurs when the information either does not exist or is not properly communicated if it does exist (Rahim, 2011). The focal person receives the sent role and begins an interpretation process. Role conflict occurs at this stage if the sent role is different from the role expected by the focal person. The emotional costs of role conflict for the focal person include low job satisfaction, low confidence in the organization, and a high degree of job-related tension. Carpenter and Miller (1981), suggests student affairs should focus on role development opportunities that are continuous and cumulative in nature. Role development provides direct result of interaction between the staff member's environment and growth. And, should offer preparation for mastery of knowledge, skill enhancement and competency-building in order to reduce role ambiguity.

A very frequent behavioral response to role conflict is withdrawal or avoidance of those who were seen as creating the conflict causing role ambiguity. Rahim (2011) reported a negative relationship between role conflict and organizational effectiveness if not addressed. Subsequently, role conflict and ambiguity have an interactive effect (role conflict x role ambiguity) on the supervisory ratings of job performance. Therefore, supervisors are encouraged to engage in continuous role development in order to increase professionalism (Carpenter & Miller, 1981).

Conservation of Resources

A coping strategy such as the conservation of resource (COR) is used when there is an imbalance at work. Conservation of resource theory reasons people strive to retain, protect, and build resources in order to manage stress in the environment and in cognition (Hobfoll, 1989). Consequently, COR theory suggests that stress is triggered by change, transitions, or unforeseen challenges (Hobfoll, 1989). Conservation of resource can help discuss job satisfaction as an application of organizational behavior/psychology.

The theory defines resources in terms of job security, rewards, decision-making, resiliency, and social support (Halbesleben, Neveu, Paustian-Underdahl, & Westman, 2014). Conservation of resource specifically addresses the loss of resources in the work environment as it relates to job satisfaction. Individuals were found to approach work differently, exhibiting lower job performance or increased signs of emotional exhaustion (Halbesleben, Neveu, Paustian-Underdahl, & Westman, 2014). Conservation of resource is a crucial theory when discussing residence life staff because of the negotiation of work location being, in most cases, also home. The basic tenet of COR indicates individuals biologically strive to obtain, retain, foster and protect resources, which is a primitive, but dynamic response (Gorgievski & Hobfoll, 2008). Therefore, the effects of vicarious trauma can be processed as a threat in the form of a psychological resource loss and trigger physiological responses such as stress, anxiety, a sense of helplessness, or low job mastery (Zeidner, Ben-Zur, & Reshef-Weil, 2011). These changes under COR should be stabilized in order to encourage healthy wellbeing (Gorgievski & Hobfoll, 2008). Figure 8 illustrates emotional intelligence as the tool to restore order while the loss is

caused by vicarious trauma. In COR, the impact to job satisfaction could be understood as how well the residence life staff professionals is able to restore the balance.

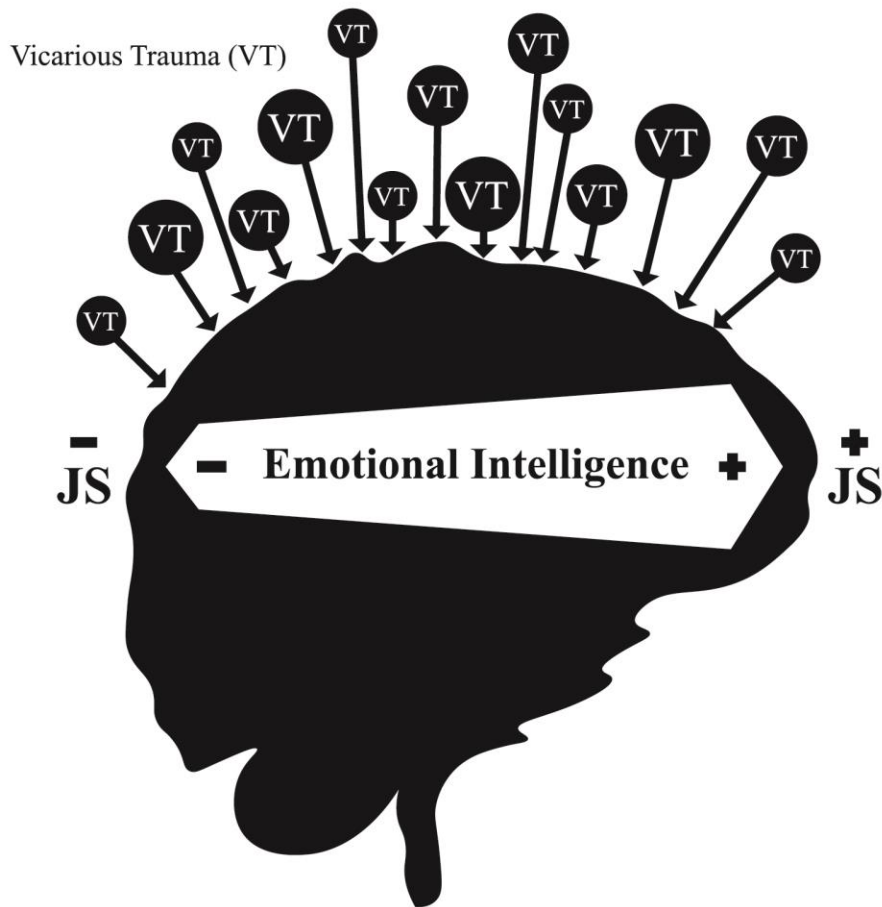


Figure 8. Conservation of resources for residence life staff members. Copyright 2016 by L. S. Hodge.

Stress permeates all aspects of individual's life and can have positive results, however, when most individuals think of stress it is seen negatively. Stress is a broad psychological concept because the linkage to different facets of the individual's life. For the focus of this study stress will be specifically related to exposure of vicarious trauma. Traditional conceptualization

of stress is seen as a stimulus, response and interaction due to an event or series of events (Dewe & Trenberth, 2004). However, critics of this definition are concerned that if stress is defined too narrowly the significance of stress as it relates to work can be misrepresented. Consequently, a broader view to define stress expands to take into consideration the meaning or significance the individuals give to the event(s) (Dewe & Trenberth, 2004).

As a greater understanding of the potential exposure of vicarious trauma and the competence of a staff member, there were considerations of the impact. The literature suggests there is a correlation of emotional intelligence and work outcomes; specifically job satisfaction. Brown et al. (2002) found that individuals who internalized their work through role expectations had positive job outcomes and decreased levels of emotional dissonance. Finding a relationship between these variables will help further explain the residence life professional experience.

Summary

In summary, residence life staff members play a crucial role in engaging on-campus students. The close proximity to students creates an increase of exposure to trauma. Responding to incidents and advocating for students who are victimized, in many cases, is a 24-hour job. It is important to support live-in staff to mitigate the effects of vicarious trauma as much as possible. With the limited information available to discuss vicarious trauma of residence life staff members, it is important to continue research in this area. Literature was available in the area of burnout and compassion fatigue however; limited information was available about vicarious trauma. The information extrapolated from the research was pulled from other helping fields such as a mental health counseling and social work, which identifies a gap in the literature.

This study hopes to fill a gap in the literature through evaluating emotional intelligence, vicarious trauma, and job satisfaction to further examine the experience of residence life staff.

CHAPTER 3 METHODOLOGY

Introduction

In US colleges and universities, residence life staff often serves as first responders to a student who has been victimized (Collins & Hirt, 2006). As previously highlighted, colleges and universities are not exempt from emergencies or crisis. Therefore, staff members are exposed to traumatic stimuli due to the very nature of the work. This study will attempt to identify the relationship between vicarious trauma and job satisfaction, taking into consideration emotional intelligence, in order to further understanding of the residence life professional's experience.

Research on job satisfaction and retention of student affairs professionals has been conducted on a variety of populations within the area of student affairs (Tull, 2006). However, the variables of vicarious trauma, emotional intelligences, and job satisfaction have not yet been studied. The findings of this study will spur discussion concerning the relationship between the selected variables and their influence to better support and retain residence life staff. For the purpose of this study, a multiple regression analysis was used to investigate the variance of vicarious trauma and the impact on job satisfaction, when mitigated by emotional intelligence of residence life professionals. The results of this study clarified the relationship between the three variables (vicarious trauma, emotional intelligence, and job satisfaction).

Research Questions

The following research questions that were used to direct this study are:

1. To what extent are residence life staff exposed to vicarious trauma?

2. To what extent might emotional intelligence mitigate the effects of vicarious trauma with regard on impact job satisfaction?

This study posited that exposure of residence life staff to vicarious trauma, mitigated by emotional intelligence, will result in an impact to job satisfaction; therefore, $JS=f(VT, EI, \beta)$. In Figure 9, β explains the correlational constant, meaning statistical relationships between two or more random variables or observed data values.

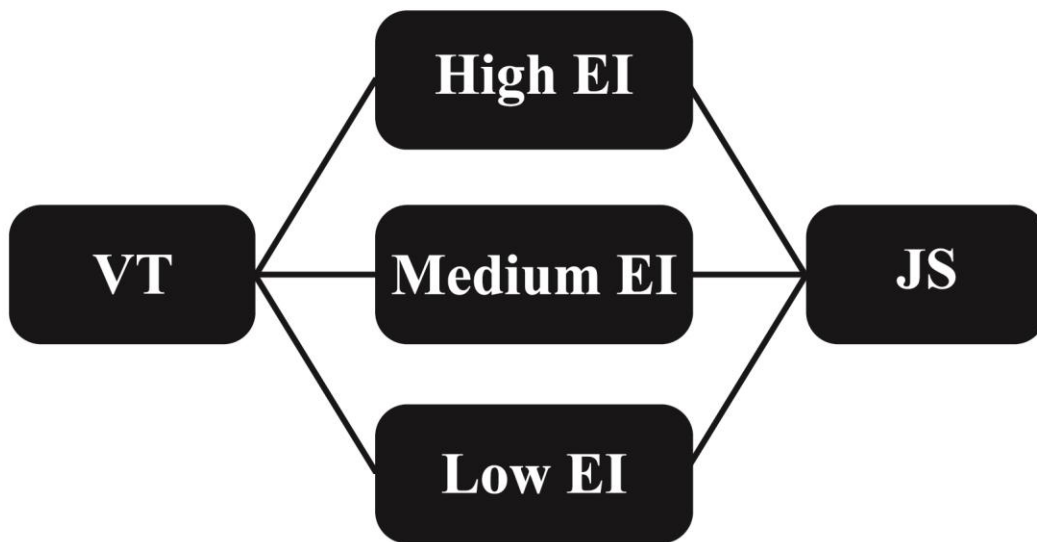


Figure 9. Regression equation to the processing model $JS=f(VT, EI)$. Copyright 2016 by L. S. Hodge.

Figure 9 suggests the difference in job satisfaction may be associated with emotional intelligence for individuals with similar vicarious trauma exposure among residence life staff.

Population and Sample

The desired population for the research study was full-time residence life professionals who have on-call responsibilities, as described in Table 1. As mentioned previously, this job function exposes residence life staff members to vicarious trauma. This population consisted of varying levels of professionals working within residence life, regardless of whether the staff member lived in, on, or off campus. Staff who qualified to take part in this study were those with job titles equal or similar to: Assistant Director, Hall Coordinator, Hall Director, Residence Life Coordinator. In order to reach a sufficient sample of residence life staff members, members of the Southeastern Association of Housing Officers (SEAHO) were the targeted association to distribute the survey. The SEAHO has members in 10 states: Alabama, Florida, Georgia, Kentucky, Louisiana, Mississippi, North Carolina, South Carolina, Tennessee, and Virginia. The membership body is robust, representing approximately 1,720 college and university housing professionals in varying roles. Also, SEAHO was selected as an appropriate access point to reach as many residence life professionals who fall within the study specifications. As discussed earlier, it was important to restrict the population to current residence life professionals who had worked at least one academic year and had on-call responsibilities.

Study Variables

In this study, the two independent variables were the occurrence of vicarious trauma in and emotional intelligence of residence life staff, and the dependent variable was the impact on job satisfaction. Thus, exploring the potential predictive nature of emotional intelligence after exposure of vicarious trauma and the impact job satisfaction.

Table 5

Research Variable Statistical Analysis

Independent(IV)/Dependent Variable(DV)	Variable	Statistical Test
IV	VT	Standard Deviation and Mean
IV	EI	Standard Deviation and Mean
DV	JS	Multiple Regression Analysis

Therefore, the correlational research design used for this study attempted to describe the relationships between variables (Creswell, 2009) in order to predict and or describe the relationship to job satisfaction. Emotional intelligence predicted job satisfaction of residence life staff members who have been exposed to vicarious trauma. Additional variables that were considered in the analysis include the following:

- Gender,
- Years of full-time work experience,
- Number of beds,
- On call duty-rotation,
- Live-in/on/off, and
- Educational attainment.

Research Design

Quantitative research methods were used to identify the relationship between vicarious trauma and the ability to continue work based on the emotional intelligence theory. The process of quantitative research refers to “gathering information focuses on describing a phenomenon

across a larger number of participants thereby providing the possibility of summarizing characteristics across groups or relationships” (Ben-Eliyahu, 2013, para 6). Thus, the objective of quantitative research is to create mathematical models, theories and/or hypotheses pertaining to deduce an emerging phenomenon (Ben-Eliyahu, 2013). The utilization of quantitative methods gathers information with the intent of hypothesis testing across a large sample, thereby providing the possibility of identifying characteristics between variables (Creswell, 2009).

Due to the larger sample size, quantitative research methods provided several benefits that include better comparison or determining relationships between variables, and the ability to generalize findings to the broader population informing policy development (Ben-Eliyahu, 2013). Utilizing quantitative research design, this study investigated the impact of vicarious trauma to residence life staff using a multiple regression analysis. Multiple regression is a simple linear regression that predicts the value of a variable based on the value of two or more other variables (Creswell, 2009). The outcome variable was the dependent variable (job satisfaction) and the predictive variables were the independent variables (vicarious trauma and emotional intelligence).

Instrumentation

The instruments that were used for this study included a questionnaire comprised of the following validated inventories: Vicarious Trauma Scale (VTS; Appendix B), Genos Emotional Intelligence Inventory (Genos EI; Appendix C), and Job Satisfaction Survey (JSS; Appendix D). Salant and Dillman (1994) discussed the appropriateness of survey research, stating “If your goal is to find out what percentage of some population has a particular attribute

or opinion, and the information is not available from secondary sources, then survey research is the only appropriate method” (p. 9). The researcher obtained the appropriate permissions to use the instruments included in this study (Appendices B-D).

Vicarious Trauma Scale

The vicarious trauma scale (VTS) was developed to assess subjective levels of stress associated with traumatized population. It is an 8-item self-reported measured on a 7-point Likert scale designed to better understand how the experience of work to distressed. A higher score indicates a higher level of distress (Vrklevski & Franklin, 2008). While VTS measures a person understanding of work related stress, it is important to note the vicarious trauma has been measured through various tools/inventories.

In earlier literature, the Trauma and Belief Scale (TABS) was used to assess beliefs about self and others that are related to five needs commonly affected by traumatic experience: safety, trust, esteem, intimacy, and control (Pearlman, 2003). While TABS has been shown to be a valid and reliable tool, the length of the inventory was a concern. The VTS scale provides adequate assessment and reliability to screen for exposure to vicarious trauma (Vrklevski & Franklin, 2008).

Reliability and Validity

The VTS has been identified as an appropriate psychometric tool that can be used in employment settings where employees are exposed to clients’ traumatic experiences (Vrklevski & Franklin, 2008). However, these researchers recommend that VTS results be used as a general

screening tool and for a basis of discussion, not as a way to formally diagnose. With this information in mind, the lack of formal diagnosis can be considered a limitation of the tool. The VTS (Cronbach's $\alpha = .88$) assesses subjective levels of distress associated with working with traumatized clients. The VTS is measured on a 7-point Likert-type scale based on 7-items, ranging from 1 (strongly disagree) to 7 (strongly agree); total scores range from 8 to 56, a higher score indicating higher levels of distress (Vrklevksi & Franklin, 2008). A total VT score can be obtained by summing the results; higher scores indicate more VT. According to Aparicio et al. (2013), a score in the range of 8 to 28 indicates low VT, a range of 29 to 42 indicates moderate VT, and a range of 43 to 56 indicates high VT (Aparicio et al., 2013). Permission to use scale was granted by the researcher (Appendix B).

Emotional Intelligence Inventory

An individual's emotional intelligence will be determined through the Genos Emotional Intelligence Inventory, or Genos EI. The Genos EI is a 14-item self and multi-rater assessment designed specifically for use in the workplace as a learning and development tool (Palmer, Stough, Harmer, & Gignac, 2009). Genos EI inventory measures how often people demonstrate emotionally intelligent workplace behaviors that represent the effective demonstration of emotional intelligence in the workplace. Genos EI has shown how often work behaviors correlate to various workplace performance indices (Palmer et al., 2009).

The results of Genos EI could identify workplace behavior as a learning and development tool to aid the valuable human resource, in this case residence life staff. The developers of the assessment caution researchers that Genos EI does not measure emotional intelligence; rather,

the inventory measures how often employees demonstrate emotionally intelligent workplace behaviors representing the effective demonstration of emotional intelligence in the workplace (Palmer et al., 2009). The results of the inventory provides context to workplace performance outcomes and emotional appropriate behavior.

Respondent's answers to items in the Genos EI measure positive emotions how often individuals display emotionally intelligent workplace behavior that underlie success. Measures included emotional self-awareness, expression, awareness of others, reasoning, self-management, management of others and self-control (Palmer et al., 2009). Genos EI has also been examined within the context of predictive validity and job performance (Palmer et al., 2009). The Genos EI short version is scored on a 5-point Likert scale: 1= Almost Never, 2=, Seldom, 3= Sometimes, 4= Usually, 5= Almost Always. The Genos EI Short version allows only for a total EI score; seven of the questions (2, 4, 6, 8, 10, and 12) should be reversed coded to calculate the final score (Ginac, 2008). Permission to utilize the assessment was granted by Genos International (Appendix C).

Reliability and Validity

The Genos EI score has been validated against earlier emotional intelligence inventory iterations to report workplace output, organizational commitment and leadership abilities (Gignac, 2008). Specifically, Genos EI was examined within the context of predictive validity of job performance in a re-analysis of sales professionals' work performance. In this study, results indicated that sales professionals' job performance was impacted by the length of sales calls.

Based on a hierarchical multiple regression, the Genos EI total scores exhibited a statistically significant unique effect correlational constant (Gignac, 2008). For the purpose of this study the Genos EI short version will be utilized. The literature suggests the total EI effect identified within the long version (70-item inventory) would be expected in the short version (14-item inventory; Palmer, Stough, Harmer, & Gignac, 2009). The mean subscale reliability for internal consistency ranges from 0.71 to 0.85; and a test-reliability coefficient of 0.83 (Palmer et. al., 2009). Also, the Genos EI reports individual results in the context of work performance outcomes (Gignac, 2008). High Genos EI scores represent individuals who engage in EI behaviors on a relatively frequent basis, while low Genos EI scores represent individuals who engage in EI behaviors relatively infrequently.

Job Satisfaction Survey

Job satisfaction can be measured through the use of several tools. However, for the purpose of this study, the Job Satisfaction Survey (JSS) was selected. The JSS is a multidimensional instrument developed for the social service sector by Paul Spector; Spector permitted this researcher to use this instrument in this study (Appendix D). The JSS is a 36 item, nine-facet survey to assess employee attitudes about the job and aspects of the job. Each facet is assessed with four items, and a total score is computed for all items. The nine facets include:

- Pay,
- Promotion,
- Supervision,
- Fringe benefits,

- Contingent rewards (performance based rewards),
- Operating procedures (required rules and procedures),
- Coworkers,
- Nature of work, and
- Communication.

The JSS is one of the most frequently used job satisfaction instruments and developed for the human service sector (Milda, Raimundas, & Aidas, 2011). Although the JSS was originally developed for use in human service organizations, it is applicable to all organizations (Spector, 1985). The JSS yields 10 scores based on nine facets listed above. The overall job satisfaction score is calculated by summing all 36 items describing the person's experience (Milda, Raimundas, & Aidas, 2011). The summed scores, for the 36-item total where possible scores range from 36 to 216, the ranges are 36 to 108 for dissatisfaction, 144 to 216 for satisfaction, and between 108 and 144 for ambivalent (Spector, 1985).

Reliability and Validity

The literature suggests the JSS instrument provides sufficient reliability, validity and normative data measurements (Spector, 1985). The reliability of the questionnaire and the method of coding each domain and total score with the use of the Alpha Cronbach and test-retest is a recommended measurement based on the Spector 1985 study (Gholami, et al., 2011). Studies reported the reliability coefficient of 0.6 to 0.91 with predictive validity (Gholami, et al., 2011).

The JSS was identified as an appropriate measurement tool because a study was conducted specifically on a teaching population. The results of this study found JSS to have some reliability as long as job satisfaction was clearly defined for participants (Milda, Raimundas, & Aidas, 2011). Teachers have similar job responsibilities as residence life staff such educating students, ensuring safety, and, providing a healthy learning environment.

Data Collection Plan and Analysis

Prior to emailing the Association of College and University Housing Officers-International (ACUHO-I) members Institutional Review Board (IRB) approval was obtained. Once approval was obtained, a combined online survey of the Vicarious Trauma Scale, Genos-Emotional Intelligence Inventory-Short, and Job Satisfaction Survey was distributed on a secure web server. Surveys were emailed according to region (via the University Qualtrics survey software) to residence life professionals who had on-call responsibilities. In order to reach the largest population of residence staff, the survey was sent to the Southeastern Association of Housing Officers (SEAHO); the SEAHO is an affiliate of Association of College and Housing Officers-International (ACUHO-I), the national association for housing and residence life professionals. Many residence life professionals are members of ACUHO-I, as it is the leading national association for housing and residence life professionals. The ACUHO-I has a membership of approximately 16,000; these members represent 1000 colleges and universities in 25 different countries, including the United States (ACUHO-I, 2011). Members of ACUHO-I are also members of SEAHO due to its affiliation. This SEAHO population is approximately 1720 housing professionals.

Dillman et al. (2009) identified several ways of increasing the benefits of participation, which were used in the implementation of this study:

- Provide information about the survey to participants.
- Ask participants for their help or advice.
- Show positive regard by providing a way in which participants can reach someone if help is needed, and
- Say thank you.

Following Dillman's principles for Internet survey distribution, there is no ideal timeframe to collect data, but a 3-6 week period to complete the survey should be sufficient (Dillman et al., 2009). Participants received two emails; the first email introduced the survey and researcher on Friday, May 20, 2016 (Appendix G) and a follow-up reminder email was sent on Monday, June 6, 2016 (Appendix H). The survey closed on Wednesday, June 15, 2016. The goal response rate was 20-30% of the SEAHO population, which should yield 344-516 participant responses (Appendix F).

Limitations

As with all research, there were limitations to this study. This study's primary sample population consisted of residence life professionals with at least one academic year of professional work experience. This requirement could impact the response rate for the study. However, this distinction was important in order to discuss the occurrence of vicarious trauma.

Secondly, this study did not seek to distinguish between live-on and live-off positions. It does not appear from the review of job descriptions that there is a standard classification for live-

on and live-off positions. Consequently, there could be a greater relationship with those in a live-in function, but the study will not account for this distinction.

Thirdly, this study did not explore the work environment. Several studies that specifically researched job satisfaction indicated a relationship between supervisor, working conditions, organizational culture/structure and other work environment dynamics. Thus, in order to have a focused study, work environment was not specifically considered.

Lastly, the results of this study relied upon direct self-report through the questionnaires. While self-reports are a widely accepted quantitative strategy, there are several limitations associated with its use, including the following:

- Respondent motivation,
- Anchoring effects (use an initial piece of information to make subsequent judgments),
- Understanding of questions,
- Self-presentation (self-awareness or self-deception),
- Bias, and
- Memory recall (Paulhus & Vazire, 2007).

It was also important to note that after a review of the literature there were no previous studies found that specifically studied the impact of vicarious trauma in residence life professionals job satisfaction mediated by emotional intelligence. Residence life professionals have been studied to explain job satisfaction and emotional competency, but nothing was found to include the variable of vicarious trauma. This lack of information meant research was extrapolated from other professions such as teaching, mental health counseling, and social work.

The similarities in job function were inferred to have similar impacts on residence life professionals.

Originality Score

The researcher's major professor submitted this dissertation to iThenticate and shared the originality results with all members of the dissertation committee.

Summary

Combining the Vicarious Trauma Scales, Genos Emotional Inventory, and Job Satisfaction Survey allowed for an assessment of the impact of overall exposure to vicarious trauma as it relates to work (VTS) and the impact of job satisfaction (JSS), mitigated by emotional intelligence (Genos EI inventory). The results of the scales may lead to a greater understanding of how residence life staff conceptualizes trauma and the impact to work. The surveys were collected anonymously to protect the privacy of the participant. Thus, this chapter described the methodological steps implemented to explain how vicarious trauma and emotional intelligence impacted residence life staff job satisfaction.

CHAPTER 4 RESULTS

Introduction

This study examined the relationship between vicarious trauma, emotional intelligence, and job satisfaction of residence life staff members. The results from the survey are discussed in this chapter guided by the following research questions:

1. To what extent are residence life staff exposed to vicarious trauma?
2. To what extent might emotional intelligence mitigate the effects of vicarious trauma with regard on impact job satisfaction?

The first question identified the occurrence of vicarious trauma in residence life staff. In the second question multiple regression was used to conduct a predictive analysis of and explain the relationship between the dependent variable, job satisfaction and the two independent variables, vicarious trauma and emotional intelligence. This chapter provides a summary of participant demographics and a detailed description of the two independent variables and the relationship to the dependent variable.

Demographic Information

The survey was emailed to the membership of the Southeastern Association of Housing Officers (SEAHO) that is comprised of approximately 1,720 housing professionals in varying professional roles. Participants received two emails asking to participate in the survey. The number of emails was approved by SEAHO Research leadership as a condition to use the listserv. Therefore, the population was contacted one less time than was originally planned. The

goal response rate was 20-30% of the SEAHO population; however, the response rate was 12% after removing incomplete results.

The demographic information provided context in regards to the sample and identified inconsistencies, in the results. The sample $n=198$ comprised as the following; 61.6% of the respondents were female, 76.3% identified as White/Non-Hispanic/Euro American, 85.9% had Masters degrees, 25.3% respondents had 3-5 years of experience, 58.6% lived on campus in some capacity (42.4% live-in and 16.2% live-on), 44.9% supervised 1001+ beds, and 51.5% indicated spirituality was a part of the decision making (23.2% strongly agree and 28.3% agree combined). Similarly, respondents provided important institutional information; number of on campus residential beds, and finally campus safety support.

Research Question 1 Analysis

Research question one was answered to what extent vicarious trauma occurred in residence life. The results indicated residence life staff members were exposed to vicarious trauma ($M= 37.00$). The means as seen in Table 6 indicate residence life staff experienced VT.

Table 6

Vicarious Trauma Results

Variable	Range	Minimum	Maximum	Mean	Std. Deviation	Variance
VT	43	13	56	37.00	8.159	66.569

The respondents ($n=198$) varied in responses of exposure, the lowest level of vicarious trauma at 13 (Minimum) and the highest level of vicarious trauma at 56 (Maximum); the range

between the lowest and highest equaled a vicarious trauma score of 43. The standard deviation showed the extent of variance between VT scores was $\sigma=8.159$, or ± 8.159 of exposure to vicarious trauma in residence life.

To highlight the manner in which VT differs across demographic groups, an analysis was conducted. A series of mean comparisons was run on the following variables, gender identity, race/ethnicity, education, years of work experience, living accommodations, number of beds under supervision, and spirituality related to VT for individual characters and then an analysis of institutional characteristics was analyzed. Each of the variables will be discussed individually. It is important to note, all categories that were less than 3% of the population were excluded from the analysis.

Vicarious Trauma and Gender

After reviewing the means of demographic factors it appeared there were no substantial differences within gender identity, but specifically female and male. The result of gender and vicarious trauma as seen in Table 7; showed the survey respondents were mostly female 61.6% of the study participant with $M=37.66$, male respondents accounted for 37.4% of survey participants $M=36.04$, less than 2 point difference. However, female participants reported experiencing higher levels of vicarious trauma, but only slightly higher than males (Table 7).

Table 7

Gender Identity and VT

Variable	Mean	<i>n</i>	%
Gender Identity			
Female	37.66	122	61.6
Gender Non-confirming	35.00	1	0.5
Male	36.04	74	37.4
Rather not respond	29.00	1	0.5

Vicarious Trauma and Race/Ethnicity

Similar to gender identity there was minimal variance between race and ethnicity, White/Non-Hispanic/Euro American ($M=36.63$, 76.3%) and African American/Black/Afro Caribbean ($M=37.75$, 18.2%) participants; African American/Black/Afro Caribbean respondents showed higher exposure to vicarious trauma (Table 8).

Table 8

Race/Ethnicity and VT

Race/Ethnicity	Mean	<i>n</i>	%
African American/Black/Afro Caribbean	37.75	36	18.2
Biracial/Multiracial	35.25	4	2.0
East Asian/Asian American	44.00	1	0.5
Hispanic/Latino/Spanish	41.80	5	2.5
Hispanic/Afro Caribbean/Black	42.00	1	0.5
White/Non-Hispanic/Euro American	36.63	151	76.3

However, Table 9 shows there were differences within group when considering gender identity. When looking at gender and race/ethnicity there was slightly more variance between African American/Black/Afro Caribbean males and White/Non-Hispanic/Euro American males; the variance was approximately a 3-point difference, which was higher than the variance between African American/Black/Afro Caribbean males and females. In this case, African

American/Black/Afro Caribbean males showed the highest level of vicarious trauma within the gender identity factor, it's important to note the difference is small, but shows there was a larger variance.

Table 9

Gender Identity and Race/Ethnicity

Race/Ethnicity	Female	<i>n</i>	Male	<i>n</i>
African American/Black/Afro Caribbean	37.17	24	38.92	12
White/Non-Hispanic/Euro American	37.33	90	35.71	59

Vicarious Trauma and Education Level

Education level unlike the previous showed the most variance within the group.

Respondents with a Bachelor's degree showed the highest levels of vicarious trauma ($M=40.25$, 6.1%) as compared to respondents with a doctorate or any terminal degree ($M=33.21$, 7.1%).

The majority of sample held a Master's degree and reported experiencing vicarious trauma ($M=37.19$, 85.9%); however, the variance can be seen between those with a Bachelor's degree and Doctorate or any terminal agree at 7 points difference. This difference could indicate those with advanced master's degrees and/or doctorates are able to reduce levels of vicarious trauma (Table 10).

Table 10

Educational Level and VT

Education	Mean	n	%
High School	23.00	1	0.5
Associates	33.00	1	0.5
Bachelors	40.25	12	6.1
Masters	37.19	171	85.9
Doctorate or any terminal degree	33.21	14	7.1

Vicarious Trauma and Years of Work Experience

Years of work experience saw an increase in vicarious trauma 1-2 years ($M=38.64$, 18.2%), 3-5 ($M=39.04$, 25.3%), 6-10 ($M=39.04$, 23.2) and then there's a decline after year 10; 11-15 ($M=34.96$, 11.6%) and 15+ at the lowest exposure ($M=32.62$, 19.7). The assumption here is that much like education level (Table 11), the more years of experience a residence life staff member has, the more likely they are able to decrease exposure to vicarious trauma.

Table 11

Years of Experience and VT

Years of Work Experience	Mean	n	%
Less than one year	38.25	4	2.0
1-2	38.64	36	18.2
3-5	39.04	50	25.3
6-10	39.04	46	23.2
11-15	34.96	23	11.6
15+	32.62	39	19.7

Vicarious Trauma and Living Accommodations

The results of living accommodations were straightforward: respondents who lived on campus experienced higher levels of vicarious trauma (live-in $M=38.56$, 42.4% and live-on $M=38.56$, 16.2%) than their counterparts who lived off-campus ($M=34.91$, 40.4%). The

interesting finding was there was no difference if an individual lived-in or on, suggesting that living off campus decreases vicarious trauma (Table 12).

Table 12

Living Accommodations and VT

Living Accommodations	Mean	<i>n</i>	%
Live-in	38.56	84	42.4
Live-on	38.56	32	16.2
Live-off	34.91	80	40.4

Vicarious Trauma and Number of Beds under Supervision

The number of beds indicated that as beds increased, vicarious trauma in respondents increased (201-400— $M=37.48$, 10.6%; 401-600 $M=38.63$, 20.2, 601-800 $M=39.67$, 7.6, 801-1000 $M=42.76$, 8.6%). The sample showed approximately 44.9% of the respondents’ directly supervised 1000+ beds, but this group experienced less vicarious trauma ($M=34.66$) suggesting there was a relationship with the number of beds within an individual’s supervision (Table 13). It is important to point out the relationship does not indicate causation, for example the number of beds under direct supervision does not cause vicarious trauma, rather the number of beds under a residence life staff member supervision increases his/her chances to exposure to vicarious trauma. The highest level of VT identified occurred within 801-1000 ($M=42.76$) further corroborating the relationship between number of beds under direct supervision and VT. However, there is a change in direction 1001+ which suggesting a difference with this many beds.

Table 13

Number of Beds under Supervision and VT

Numbers of Beds Under Supervision	Mean	<i>n</i>	%
Less than 200			
201-400	38.75	4	2.0
401-600	37.48	21	10.6
601-800	38.63	40	20.2
801-1000	39.67	15	7.6
1001+	42.76	17	8.6
NA	34.66	89	44.9
	36.00	12	14.2

Vicarious Trauma and Spirituality

Respondents were asked to answer the following prompt; a strong sense of spirituality guides my decision-making and life choices on a 5-point Likert scale (strongly agree to strongly disagree). The analysis of this question did not take into consideration responses that selected neither agree nor disagree. The results more than half the sample respondents relied on their spirituality to make decisions 51.5%, while 29.2% did not. Thus, respondents who did not use spirituality had a slightly higher exposure to vicarious trauma (combined agree $M=36.8$ as compared to combined disagree $M=37.1$). This finding corroborates the literature that suggests spirituality can assist with decreasing vicarious trauma (Table 14).

Table 14

Spirituality and VT

Spirituality	Mean	<i>n</i>	%
Strongly Agree	37.98	46	23.2
Agree	35.95	56	28.3
Neither agree nor disagree	37.08	38	19.2
Disagree	37.63	30	15.2
Strongly Disagree	36.71	28	14.1

Institutional Demographics

Respondents were able to select from one of two institutional classification: public or private and describe other institutional characteristics, such as total number of residential beds on campus and the type of campus safety support that existed on their campus. Each characteristic from Table 9 will be individually discussed but a summary of the sample showed 72.2% of the population was public institutions, with 38.4% having 5001+ residential beds on campus and 91.4% relied on campus police as the primary source of campus safety support.

Table 15

Institutional Classification and VT

Institutional Classification	Mean	<i>n</i>	%
Public	36.48	143	72.2
Private	36.36	55	27.8

Vicarious Trauma and Total Number of Residential Beds on Campus

The variability between means due to the number of residential beds on campus is minimal (Table 16). The greatest variance occurs between 501-1500 ($M=38.21$, 16.7%) and 5001+ ($M=36.24$, 38.4%). An interesting finding, though is that there is a decrease in vicarious trauma at 1501-2500 beds ($M=36.97$, 17.2%) a decrease from 501-1500, then an increase at 2501-3500 beds ($M=37.32$, 12.6%), then another decrease when there are 3501-5000 beds ($M=36.93$, 14.1%). The increase and decrease within group appears to only occur in this grouping. All other groups there is either an incremental increase or decrease, but a sequence of increase and decrease such as this grouping.

Table 16

Number of Residential Beds on Campus

Total Number of Residential Beds on Campus	Mean	<i>n</i>	%
Less than 500	43.5	2	1.0
501-1500	38.21	33	16.7
1501-2500	36.97	34	17.2
2501-3500	37.32	25	12.6
3501-5000	36.93	28	14.1
5001+	36.24	76	38.4

Vicarious Trauma and Campus Safety Support

The final institutional characteristic campus safety support can be analyzed as campus police can reduce the occurrence of vicarious trauma. The respondents of study relied on campus police, and those who did not reported higher means of vicarious trauma. Campus police respondents indicated ($M=36.85$, 91.4%) while other reported ($M=39$, 6.6%; Table 17).

Table 17

Campus Safety Support

Campus Safety Support	Mean	<i>n</i>	%
Campus Police	36.85	181	91.4
Security service (third party)	44.50	2	1.0
Local police enforcement	38.00	1	0.5
Other	39.00	12	6.6
NA	23.00	1	0.5

Statistical Methods of Regression

This study had three variables, two independent variables (vicarious trauma [VT]) and emotional intelligence [EI]) and one dependent variable (job satisfaction [JS]). To understand the relationship of the three variables correlation, multiple regression, and factor analysis was

conducted. In this study, a bivariate correlation using the Pearson correlation method was performed to explain the relationship between the three continuous variables. A Pearson correlation provides a correlation in strength, direction, and coefficient (r). The correlation coefficient can vary ± 1 .

The statistical method linear regression was used to understand the relationship between a dependent variable and one or more independent variables, where the relationship is displayed as a straight line on the scatter plot. In the case of Research Question 2, a multiple regression analysis was used to identify the association between a single dependent variable (JS) and multiple independent variables (VT and EI).

Research Question 2: Analysis

Research Question 2: To what extent might emotional intelligence mitigate the effects of vicarious trauma with regard on impact to job satisfaction, hypothesized that if vicarious trauma occurred emotional intelligence might impact job satisfaction? The results indicated that emotional intelligence did not mitigate job satisfaction for individuals who were exposed to vicarious trauma.

Adapted Instrument

Prior to conducting this study, the JSS reliability coefficient was 0.6 to 0.91. However, job satisfaction was complicated by an unintentional omission of an option within the survey. The scale has six options that were scored one through six for each question. There are a total of 36 questions providing the possible maximum score of 216. However, there were only five

options logged by the researcher, which reduced the possible maximum score to 180. The job satisfaction instrument defines 36-108 as dissatisfaction, 109-144 as ambivalent and 145-216 as satisfied. Consequently, given that each question did not have six point options, it reduced the maximum score for each question by six points. In an effort to interpret the data, it was decided to reduce the outcome ranges proportionally to account for the difference. This adjustment resulted in a job satisfaction score range of 36-90 as dissatisfaction, 91-120 as ambivalent, and 121-180 as satisfied. This scale created a positive relationship with the variables and did not support the theory of increased VT would decrease JS. Therefore, the factor analysis allowed the researcher to discover a relationship between variables.

Factor Analysis

To ensure the analysis was accurate a factor loading analysis was conducted for the two independent variables. Factor analysis was used to confirm the dimension can be defined and to identify which items are most appropriate for each dimension (establishing construct validity; Sekaran, 2003). This analysis found there were several questions within VT, EI, and JS, that did not correspond with this survey.

This analysis was conducted on SmartPLS statistical software used for small datasets. The factor loading analysis found there were several questions within VT, EI, and JS, that did not correspond with this survey. Appendix I provides the factor loading and collinearity analysis to confirm the results. Collinearity is used when two or more predictor variables in a multiple regression model are highly correlated, indicating one variable can be linearly predicted from the other variables accuracy. These questions identified caused an error in the initial analysis. One

assumption can be perhaps respondents were confused or unsure by the question or language used in the question, for instance the use of stakeholders in EI 1, could mean different things to different respondents, therefore, participants could have answered questions in respect to emotional intelligence incorrectly. All items from EI were removed because they were not correlated for the purpose of this study because they were less than 0.70; Table 18 shows the removed questions:

Table 18

Questions Removed During Factor Analysis EI

Question	Description
EI 1	I appropriately communicate decisions to stakeholders.
EI 2	I fail to recognize how my feelings drive my behavior at work.
EI 3	When upset at work, I still think clearly.
EI 4	I fail to handle stressful situations at work effectively.
EI 5	I understand the things that make people feel optimistic at work.
EI 6	I fail to keep in difficult situations at work.
E 7	I am effective in helping others feel positive at work.
E 8	I find it difficult to identify the things that motivate people at work.
E 9	I consider the way others may react to decisions when communicating
E 10	them. I have trouble finding the right words to express how I feel at work.
E 11	When I get frustrated with something at work I discuss my frustration
E 12	appropriately.
E 13	I don't know what to do or say when colleagues get upset at work.
E14	I am aware of my mood state at work. I effectively deal with things that annoy me at work.

Similarly, to emotional intelligence there were two questions were removed from the VT scale. The removed items did not show a strong correlation among items. The removed items did not correlate and was less than 0.70, within the construct of this study, therefore, did not match with this model (Table 19).

Table 19

Questions Removed During Factor Analysis for VT

Question	Description
VT 1	My job involves exposure to distressing material and experiences
VT 2	I find myself distressed by listening to my client's stories and situations.

Lastly, JS had several items removed; the removed items did not show a strong correlation among items. As like the two other survey tools the removed items did not correlate and was less than 0.70, within the construct of this study, therefore, did not match with this model, questions removed (Table 20).

Table 20

Questions Removed During Factor Analysis for JSS

Question	Description
JSS 10	Raises are too few and far between.
JSS 18	The goals of this organization are not clear to me.
JSS 21	My supervisor shows too little interest in the feelings of subordinates.
JSS 29	There are benefits we do not have which we should have.
JSS 31	I have too much paperwork.
JSS 32	I don't feel my efforts are rewarded the way they should be.
JSS 35	My job is enjoyable.
JSS 36	Work assignments are not fully explained.

Correlation

The items remaining were a better model fit when investigating the relationship and predictive nature of VT and EI as they related to JS. The latent variable correlation similar to the linear regression in SPSS showed that after removing the questions the relationship between variables between VT and JS is negative, the variables interacted together as for every unit increase in VT, JS decreases -0.556 (Table 21).

Table 21

Correlation of Variables

	JS
JS	1.000
VT	-0.556

The study variables appeared to have a correlation between JS and VT. The regression suggests that 30.9%, ($r^2 = .035$) of the variance can be predicted by VT when considering JS, ($p < .001$), with no other significant correlations (Table 22).

Table 22

Regression of VT and JS

Model	R Square	Adjusted R Square	Sig. f Change
a.	.309	.035	.000

b. Dependent Variable

The path coefficient shows an increase one unit of VT, there's a unit decrease in JS of -0.556. This relationship indicates as VT increase, JS decreases (Table 13). The inner model weight (path coefficient) recognizes the relationship between the constructs based on the theory and logic and visually displays the hypotheses will be tested based on an analysis of correlation. The inner weight for all predictors by SPSS and many predictors were not significant (Figure 10).

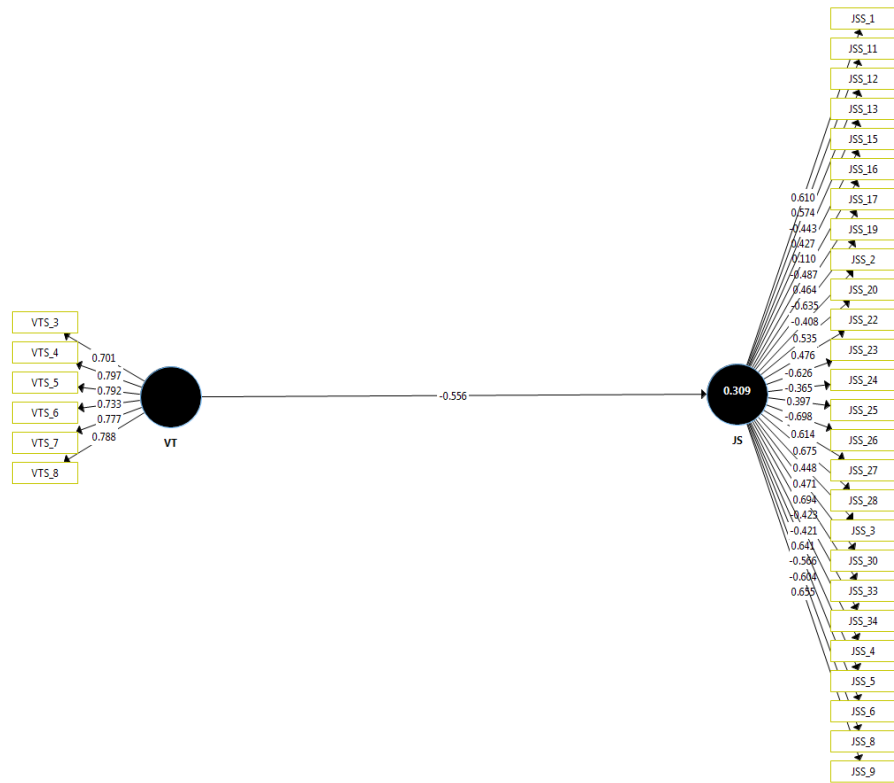


Figure 10. Factor Analysis VT and JS.

Summary

The findings in this study presented a few challenges as mentioned previously. While those challenges existed, the findings are clear vicarious trauma occurs in residence life staff and there is a relationship on the impact on job satisfaction. Emotional intelligence did not appear to have an impact, however this does not mean emotional intelligence is unneeded. A summary analysis and recommendation for future study will be beneficial to identify the potential impact of emotional intelligence on VT and JS within this population.

CHAPTER 5 RESULTS

Introduction

A review of the literature coupled with this study's findings provided context of occupational effects in residence life members. The premise of this study was to identify the occurrence of vicarious trauma and, if present, the impact to job satisfaction. While the results showed occurrences of vicarious trauma, it was unclear the role emotional intelligence played to mitigate job satisfaction. What is clear, though, there is much that can be done to support this crucial functional area of student affairs.

Purpose of the Study

The purpose of this study was to explore the impact vicarious trauma had on residence life staff members and how it impacted job satisfaction. Though studies about job satisfaction of residence life previously were conducted, the studies focused primarily on amenities, compensatory benefits, burnout/compassion fatigue, or work life balance. This study provided another perspective by investigating vicarious trauma specifically with this population and the relationship to job satisfaction and emotional intelligence. The theoretical framework—conservation of resource theory- provided guidance, along with the survey instrument. After a review of the literature, survey tools for the three variables existed and were used in the hopes of extrapolating information to answer the research questions.

Summary: Findings and Discussion

As previously mentioned, the response rate of this study was 12% of the SEAHO membership. While the sample size was small, it provided information to further discuss the residence life staff member experience. Respondents were asked about their involvement in the on-call rotation. The majority of respondents responded they participated in duty directly or indirectly 94.4%, no respondents were removed because the involvement was so high. Keeping in mind the sample was primarily Non-Hispanic/White/Euro American, female, with 3-5 years' experience, and Masters' degree holders. This study ran a multiple regression and factor analysis to identify the predictive relationship between vicarious trauma, emotional intelligence, and job satisfaction. Results were calculated as sum scores from the Vicarious Trauma Scale, the Emotional Intelligence Inventory, and Job Satisfaction Survey. In order to begin, it was first important to identify if vicarious trauma occurred and then investigate the relationship between vicarious trauma, emotional intelligence, and job satisfaction.

Research Question 1

To what extent is residence life staff exposed to vicarious trauma?

This research question was measured by correlation of means. The findings indicate vicarious trauma does exist. After reviewing the means, it appeared there were no significant differences in gender. While there was no significant difference in gender, there was some variance when taking into consideration gender identity and race/ethnicity. Additionally, the number of beds showed a relationship with vicarious trauma, as beds increased the vicarious trauma relationship increased.

The range of vicarious trauma (Table 6) indicates some respondents did not experience any vicarious trauma (minimum 13). These respondents could be staff members who are in a higher level in the organization, have more years of experiences, or those with higher educational levels, which would be consistent with the results. The same could be the same of those with higher vicarious trauma score (maximum 56). These respondents were more likely to have less education, years of experience, and be female.

The sample indicated approximately 44.9% of the respondents' directly supervised 1000+ beds, but this group experienced less vicarious trauma ($M=34.66$). The highest level of VT identified occurred within 801-1000 ($M=42.76$) further corroborating the relationship between number of beds under direct supervision and VT. Based on the varying organizational charts, at some schools there could be more layers and those responding at 1000+ beds are not responding to incidents at the same level as others especially those between 400-1000 beds.

Years of work experience saw the most consistent increase in vicarious trauma within the first 10 years of a staff member's work, and seeing the highest at 6-10 ($M=39.04$, 23.2). The assumption is staff members who stay longer are responding to more incidents or because of their years of experience are equipped to handle more. However, there was a notable decline in year 11-15 ($M=34.96$, 11.6%) and 15+ at the lowest exposure ($M=32.62$, 19.7). The variance in means indicated these staff members may participate in the on call responsibilities at the strategic level thus further removed from crisis, or developed coping strategies that reduce vicarious trauma. Much like education level, the more years of experience residence life staff member has, the more likely they are able to decrease their exposure to vicarious trauma.

Research Question 2

To what extent might emotional intelligence mitigate the effects of vicarious trauma with regard on impact job satisfaction?

Due to survey and output for this research question, the discussion will be limited. Vicarious trauma and job satisfaction has a relationship, but emotional intelligence was not a mitigating factor as previously mentioned. Consequently, the answer to this research question is no, emotional intelligence does not mitigate vicarious trauma as it relates to job satisfaction. It seems that emotional intelligence as an organizational behavior construct should not be applied to this research study. The literature suggests emotional intelligence could impact job satisfaction; however, the research is inconsistent. In a study conducted on medical studies showed there was no significant relation between job satisfaction and emotional intelligence (Ghoreishi et al., 2014). It is important to note this study used a different measurement scale, but the results of this study confirm emotional intelligence does not always impact job satisfaction.

This population however, one can assume will display high levels of emotional intelligence due to the type of work. Consequently, there were more important factors in play such as race/ethnicity, years of work experience, number of beds under supervision, or education level. The literature suggests the aforementioned factors have stronger relationship when considering job satisfaction.

Policy Implications

This study sought to identify the occurrence of vicarious trauma in residence life staff and if emotional intelligence could mitigate effects of vicarious trauma as it relates to the impact to

job satisfaction. After a review of the literature, there were no contemporary works examining the three variables, vicarious trauma, emotional intelligence, and job satisfaction in residence life staff. Studies were available that investigated job satisfaction and burnout or compassion fatigue, but not vicarious trauma. This study helps to provide an examination of the relationship between the three variables. This examination has several implications for research and for practitioners.

The ACUHO report mentioned in Chapter 2 indicated residence life staff member retention was an area of concern. The report cited quality of life, burnout, role ambiguity, and workload as reasons why residence life staff left or were dissatisfied. If issues of retention are not addressed, this could severely impact residence life programs across the country. This study found that vicarious trauma impacts job satisfaction therefore is advantageous for more investigation in this area for recruitment and retention purposes.

Continued research on vicarious trauma provides context to a complex connection between a traumatic experiences and work environments like residence life (Lazarus, 2000). If the field can better understand the pervasiveness of vicarious trauma and the effects, it can provide better support to prepare staff. The nature of the work is particularly stressful when responding to and hearing traumatic content. Safety and security are threatened when staff become aware of the frequency of traumas, often leading to feelings of loss of control and helplessness. This sense of helplessness can exasperate into varying other potentially unhealthy emotions (Table 3) if not managed. Vicarious trauma is unavoidable because it's a natural consequence of being human, connecting to and caring about for students. Recognizing that trauma occurs on college campuses and students who are victims, helps to ensure staff members

are mentally and emotionally healthy. College campuses that understand the traumatic incidents will have a lasting impact on the community, should take protective measures for both students and staff, particularly residence life staff.

The preparation of individuals to work in residence life is extremely important given the high number of individuals who are employed housing (Belch & Mueller, 2003). Graduate programs and national associations such as ACUHO-I, NASPA, and ACPA can provide training on vicarious trauma, and create an opportunity to prepare current and future residence life staff. Mental health counseling is one profession that has at least (in some cases) a course on vicarious trauma built into the curriculum. The course allows students to master the theory, intervention strategies, and treatment models needed to counsel and support individuals and families in crisis, as well as train and support first responders about crisis management and study leadership skills to be responsive crisis manager. This field is aware that vicarious trauma occurs and is necessary to discuss with students prior to work in the field. Taking into consideration residence life staff members could have a range of degrees, professional associations can fill the gap by providing trainings and seminars on vicarious trauma and how to navigate the effects. Higher Education/Student Affairs programs could consider partnering with other programs (i.e. mental health counseling or social work) that specifically address vicarious trauma in the curriculum. The courses could be offered as an elective for students to opt-into if they have an interest in residence life or currently a graduate assistant in residence life staff. This study provides a framework to share the relationship between vicarious trauma and the effects on work.

Limitations

The limitations of this study were primarily the survey tools. Emotional intelligence, a dynamic tool when specifically when addressing self-awareness, helps understand how well an individual can identify his/her own emotions and those of others. While it seemed appropriate for this study initially, it presented a challenge to interpret how it interacted with the other study variables and ultimately was not appropriate to study. The Emotional Intelligence Inventory Short-Form raw score essentially was not an appropriate tool for this study.

Similarly, job satisfaction as an output after identifying the occurrence seemed appropriate to study to understand if vicarious trauma has an impact. The survey tool included questions in hindsight there were not appropriate for this study, for instance the survey subcategories, such as pay, promotion, fringe benefits, and contingent rewards were not factors relevant to this study (Spector, 1997) that were not factors being considered for this population. The researcher also unintentionally omitted an option when entering the survey online, which skewed the results. This error impacted the studies result.

Overall, the need to understand residence life staff members is an important task and while this study had challenges, the findings can assist in the conversation this population needs to continue to be studied. The job function of this staff is unique and any information to help better support the staff members is important.

Recommendations

Even with the limitations of this study, the researcher has recommendations for future research. The recommendations are positioned into three categories professional

development/training, self-care techniques, and supervisor engagement. Additionally, the recommendations support the conservation of resource theory (COR) in that as individuals try to retain, protect, and build resources in order to manage stress and cope. The conservation of resource theory guided these recommendations to assist with decreasing the exposure to, or recovering from, vicarious trauma in the hopes of maintaining job satisfaction.

Training and Professional Development

Training is considered an essential function for organizational success. Training provides the following benefits; educates staff about policy and procedures, ensures an opportunity to cover mission/vision and expectations in the role, and clarifies safety and health in order to perform role. Effective training is imperative especially when considering new employees. Training can also be used as a socialization opportunity, because it can influence how staff responds to work tasks (Jones, 1986). Training should be conducted on a continuous basis to ensure staff is aware of changes, maintain order, update processes, and correct behavior. Consequently, should be done on a regular basis and can be supported with other professional development opportunities.

Professional development is a learning/development technique to maintain professional relevancy and range from attending conferences, seminars, webinars, or participating in informal learning opportunities such as book clubs. Professional development encourages staff to continue to strengthen their knowledge base throughout their career. It also closes any gaps college/graduate work did not cover, because programs cannot cover the range of topics that would be applicable to residence life programs. Lastly, professional development provides

additional support through continuous education and should be encouraged as a crucial motivator in a learning environment. A quote that speaks to the necessity of continuous learning is “Desire to learn counts more than any other qualification, and seriousness more than brilliance”—
Cintrón, 1994.

Self-Care Techniques

One strategy to mitigate the effects of vicarious trauma is self-care. Self-care is maintaining a healthy balance between work and professional life (Gerding, 2012). Researchers have found individuals who engage in spiritual exploration decreased their experiences of vicarious trauma. Spirituality was found to help give a larger sense of meaning, thus decreasing the individuals’ cynicism or sense of hopelessness (Gerding, 2012). Spirituality as a coping technique ranges from prayer, mediation, and/or positive thinking (Bober & Regeher, 2005). Staff members who used spirituality as a strategy found purpose which translated into their work (Bober & Regehr, 2005).

Another consideration for residence life staff members would be to work with a mental health professional to discuss an individual’s trauma history. Cunningham (2004) recommends allowing time to discuss the impact of vicarious trauma and allows for an individual to conceptualize their experiences in a safe environment. Trauma history analysis has been utilized as a teaching strategy in the classroom setting for mental health counselors to identify triggers or unresolved concerns that could impact an individual’s work performance. This provides an opportunity for students to work on coping strategies that may be helpful later on in their professional careers.

Encouraging self-awareness fosters environments where staff can identify the impact previous personal experiences can have in helping a victimized individual. An individual is encouraged to seek help for any past experiences as they can evoke strong personal reactions, when triggered through listening to a similar experience. One research study found individuals who were previously victimized are drawn to “helping fields;” specifically 60% of clinicians had experienced trauma before entering the field (Cunningham, 2004). However, individuals with unresolved personal trauma may experience stronger emotions while working with victims (Cunningham, 2004). Staff member’s effort into spending time with a strategy that works, reduced stress induced symptoms (Gerding, 2012).

Supervisor Engagement

Another recommendation that could be helpful to decrease vicarious trauma is supervision and increase job satisfaction. Supervision allows the trauma to be addressed, symptoms to be detected early, and a support to debrief after exposure to the trauma. Supervision was noted as the opportunity to foster an atmosphere of respect and safety for staff (Rosenbloom, Pratt, & Pearlman, 1995). An environment where supervision is integrated into the work environment allowed for the effects of the trauma to be addressed in a nonjudgmental and supportive manner (Gerding, 2012).

Supervisor engagement plays a critical role in determining what is needed for success in these roles and can reduce the role ambiguity. Supervisor engagement while it wasn’t a study variable, showed that respondents indicated a desire for guidance and clear expectations, the ability to make decisions, and supervisors being available to answer questions. These

relationships suggest that if supervisors do not provide these opportunities, the effects of vicarious trauma can go unnoticed. An engaged supervisor can ask probing questions, provide direction, and referral if needed to a staff member who is dissatisfied with work or experiences negative effects of vicarious trauma.

Lastly, debriefing is a strategy that can also be considered self-care, but recommended to be facilitated by a supervisor. Debriefings can be a brief, informal information exchanges to encourage feedback (Berg et al., 2014). Debriefings provide team members the opportunity to immediately reflect on individual response, identify errors, and discuss areas for improvement. Debriefing opportunities afford the identification of community concerns in a nonthreatening environment; as long as staff members feel psychologically safe, believe they will not be punished, embarrassed, or suffer negative consequences by asking questions, seeking help, raising concerns, reporting errors, or offering suggestions. Debriefings should be conducted to also capture deficiencies in protocol, update process, or inspire training opportunities and to also discuss dissatisfaction with the job. Debriefing allows the individual to reconsider coping strategies, or identify symptoms to address any potential negative effects of exposure. Debriefing should be regarded as an opportunity create an environment for support of staff to openly talk about their experiences and support each other through the process of making meaning of the traumatic content (Cunningham, 2004).

Future Research

The findings of this study offer a number of potential next steps. Future studies may choose to utilize a different methodology, or they may choose to conduct a qualitative study.

The limitations from this study may help provide direction to use survey tools more appropriate for this population for example the Professional Quality of Life (ProQOL). The ProQOL is a 30-item scale that asks respondents to rate responses in order to measure negative and positive effects of helping others who experience trauma (Stamm, 2010). This tool could be more useful to talk about the work environment and infer job satisfaction.

In addition to using appropriate survey tools, conducting a study looking at vicarious trauma and resilience, instead of emotional intelligence as a mitigating factor, could better explain why some staff members leave or stay in residence life. Resilience is the process of adapting in the face of adversity, trauma, tragedy, threats, or significant sources of stress, thus it could provide a more suitable relationship. Studying resilience is also multi-layered, but assesses an individual's capacity to make realistic plans, take steps to carry them out, confidence in strengths and abilities, skills in communication, and problem solving skills (APA, 2014). Resilience encourages individuals to look at past experiences as sources of personal strength to help learn about what strategies to build resilience. A concept that speaks to resilience and vicarious trauma is vicarious resilience. Vicarious resilience encompasses the ability to overcome hardship requiring fluid boundaries to learn, heal, and make meaning (Acevedo & Hernandez-Wolfe, 2014).

The opportunity for future research is to discuss the effects of consistently making decisions under stressful conditions. The crisis management decision-making/response process suggests the brain is designed for survival, to make safe, decisions and to do it quickly (Cesta et al., 2014). However, the consequences of making a knee-jerk reaction in crisis situations can be totally disastrous, coupled with the content of the crisis, and could have severe consequences.

Techniques can be used respond to a crisis to enable staff to make a better decision; which include training, simulation, and/or role play. However, no studies could be found on crisis decision-making process in higher education and specifically with residence life staff. There are studies available for first responders and security management, so it is recommended to study the crisis decision-making process of residence life staff while managing vicarious trauma as an opportunity to add to the literature.

Lastly, this study could be conducted as a qualitative study, using ethnography, or longitudinal within group approach. Ethnography is the systematic study of people and cultures. It is designed to explore cultural phenomena where the researcher observes society from the point of view of the subject of the study. Facilitating an ethnographic study would allow researchers to better understand vicarious trauma, crisis decision making, and work environment impact in residence life staff. With the support of a national organization such as ACUHO-I would allow for national participation. Conversely, a longitudinal study the collection and analysis of data over time, for the research purpose is to understand changes. A longitudinal study would allow for comparison of subgroups, for instance, gender identity, years of experience, educational level, or years of experiences. The data overtime would help bring context the complexity of vicarious trauma and negative relationship to job satisfaction.

Summary

In summary, staff members play a crucial role in restoring order after a traumatic experience on a college or university campus. These crises have far-reaching effects on the campus. The aftermath of a traumatic experience can prompt psycho-social-cognitive-emotional

trauma with much of the focus being offering support to student. The research is limited in terms of the support needed for staff in the recovery process. If staff members do not receive support, there could be an increase in role conflict and decrease in job satisfaction. The pressure to restore order should not come at the risk of the mental health of staff; therefore, crisis response protocols should consider the interventions needed for staff to be successful.

Residence life staff's close proximity to students creates an increase of exposure to trauma. Responding to incidents and advocating for students who are victimized, in many cases, is a 24-hour job. It is important to support live-in staff to mitigate the effects of vicarious trauma as much as possible. Sources of help include coping strategies, spirituality, supervision and training. These strategies have been found to be beneficial to the other helping fields such as mental health counseling and social work. Due to the nature of the work residence life staff members do, it would advantageous to employ these techniques.

Finally, due to the limited information available to discuss vicarious trauma of residence life staff members, it is important to continue research in this area. Literature was available in the area of burnout and compassion fatigue; however, limited information was available about vicarious trauma. The information extrapolated from the research pulled from other helping fields such as a mental health counseling and social work, which identifies a gap in the literature.

Closing Thoughts

This study helped me understand the effects of the incident in August 2005. My week long training did not prepare me to sit on the cold pavement with that student who experienced that horrific act. My feelings of hopelessness paled in comparison to her victimization, but her

incident was woven into my story and I can say it became a trigger for me and still is to do this day. I remember her blank stare, her face became transposed on every other victimization I responded to and my natural response was to advocate for the victim. In cases of sexual assault I can now openly say, I could not advocate for students who were identified as the aggressor. The years of my own exposure to vicarious trauma negatively impacted my ability to care for a student who harmed another student, especially if that harm was sexual assault. I know this now, and as I lament I wonder what would be different if I was aware of vicarious trauma. Would I have a different professional story? Would I still experience vicarious trauma? Or would I still be working in residence life? A younger me, would have benefited from being debriefed and understanding my trauma history. I consider myself a professional who believes in a learning environment, so having the opportunity to be aware of different coping strategies, would have made a difference. Delving into the literature to gain a better of understanding of vicarious trauma was cathartic for me and reassured me there is more work to be done. My hope is that anyone who reads this manuscript has the space to create meaning if they experienced the negative effects of vicarious trauma.

APPENDIX A
SAMPLE JOB DESCRIPTIONS

Retrieved from HigherEdJobs.com, excerpt postings
University specific information was removed to preserve anonymity

Area Coordinator (Hall Director)

XXXX University (XXXX) is a personal, small-town school that provides a superior blend of liberal and technical studies in the natural setting on XXXX Upper Peninsula. XXXX offers undergraduate degrees in 45 areas of study that attract students from every county in XXXX, more than a dozen states and provinces, and nine nations. XXXX is XXXX's most personal public university emphasizing an undergraduate experience provided by a fully qualified and dedicated staff.

XXXX University is inviting applications for a full-time, ten-month, administrative professional position, under the supervision of the Director of Campus Life and Housing. This is a live-in position and is provided room and board. The Area Coordinator serves as a designated Hall Director. The Hall Director is a term-limited position. Responsibilities include general and collaborative responsibilities for student staff supervision, student interaction, office hours, on-call crisis intervention, opening and closing of residence halls, assessment and research and student organization advising.

Minimum Qualifications: Bachelor's degree (BA/BS) and a minimum of one (1) year prior experience in residential life and student affairs required. Demonstrated leadership, crisis intervention training, program development skills, and committee involvement. Ability to work within a team, motivate others, and available and willing to work a flexible schedule including weekends and evenings.

Effective communication skills (written and verbal), organizational skills, and human relation skills. Proficiency in Microsoft Office (Word, Excel, PowerPoint). Familiar with social media platforms. Candidates must have an understanding of student development theory, today's first year college student, and the ability to work successfully in a university environment.

Desired Qualifications: Master's degree.

Resident Director

Supervision & Training

Supervise 1 Graduate Assistant Hall Director in their supervision and advising responsibilities through regular meetings, daily contact, performance evaluations, etc.

Supervise 12-16 Resident Assistants in their floor responsibilities through regular meetings, daily contact, performance evaluations, etc.

Responsible with other Residence Life Staff for staff training in the areas that support the mission of Housing, individual hall goals, mission of XXXX University, and community development.

Work with the GAHD and advise Resident Assistants in the development, planning & assessment of programming.

Develop & maintain formal/informal contact with GAHD and Resident Assistants to assist with job/personal/academic concerns.

Student Organization Advising & Group Development

Assume leadership for student organizations/group development (These include student leadership training; recruitment, etc.)

Act as a co-advisor with the GAHD for the House Council in the building or community that you are responsible for.

Guide student leaders in the development, planning, assessment & implementation of community programming.

Develop & maintain formal/informal contact with student leaders to assist with leadership & personal development through programs, organization meetings & individual meetings, etc.

Individual Student Development & Student Contact

Establish informal relationships with students living on floors in the hall you oversee. These include attending floor meetings, regular rounds in the hall, etc.)

Build visibility & relationships with students in the community through attendance at programs, student organization meetings, eating in the dining room, etc.)

Work with GAHD and RAs to assist students in the areas of academics & personal concerns by making referrals as appropriate, etc.

Educate students about university resources, policies, etc. through the development & implementation of programs & activities.

Responsible for the conduct in your community. Including, but not limited to, reading daily reports, scheduling conduct hearings, coordinating with the Dean of Student's Office and the Associate Director.

Address students about inappropriate behavior and assist with changing behaviors through educational processes including the housing judicial process.

Administrative Functions

Provide duty coverage for one or more residence halls as appropriate.

Respond to emergencies on a 24-hour basis. There will be a duty rotation shared by all Residence Directors.

Provide students with information regarding university & community resources.

Maintain liaisons with resources including; Recreation Center, Living Learning programs, Graham Health Center, OUPD, Division of Student Affairs and other departments and community agencies.

Manage the staff training and development funds designated for your hall.

Maintain office visibility during regular business hours.

Mildly disagreeable working conditions involving working in an environment with limited privacy and noise. Staff must frequently respond to situations at any time of the day and night. The job requires moderate physical effort when responding to emergencies.

Departmental Responsibilities

Assist in the recruitment of professional and paraprofessional staff and in their selection through interviewing and evaluation.

Participate in departmental activities as appropriate including; training, check in and out, Committees & task groups, liaison relationships, etc.

Participate in fall and winter staff training prior to the beginning of each semester.

Act in accordance with all Housing Staff Policies as outlined in the Housing Staff Manual.

JOB REQUIREMENTS

Appointment is given to candidates with completed a Master's Degree in Higher Education or related degree and Housing experience. .

Due to the formal and informal demands of the position, involvements in other activities which require a sizeable time commitments. Evening and weekend work will be required.

This position is a 12 month, live-on position, with the opportunity to renew on a yearly basis.

Resident Coordinator

Description:

Under the direction of the Educational Planner, and the Executive Director of the Department of Professional Studies and Special Programs, the Resident Coordinator will work closely with Resident Supervisors to provide a safe and enjoyable experience through the preparation of evening and weekend activities, compliance with policy, and demonstration of mature behavior and good judgment.

Campus Location: XXXX

Required Knowledge:

The start date is DATE REMOVED and the end date is DATE REMOVED. All candidates should have demonstrated leadership and supervisory skills, program planning, organization and testaments of good judgment, and experience working with high school students. Candidates must know how to work collaboratively and have experience in mediation, conflict resolution, and/or experience with camp or residence life.

Preferred/Desirable Knowledge:

Required Prior Work Experience:

The start date is DATE REMOVED and the end date is DATE REMOVED. All candidates should have demonstrated leadership and supervisory skills, program planning, organization and

testaments of good judgment, and experience working with high school students. Candidates must know how to work collaboratively and have experience in mediation, conflict resolution, and/or experience with camp or residence life Bachelor's degree required.

Diversity Statement:

XXXX College believes diversity enriches the educational experience by providing students with the opportunity to learn from individuals who may have different backgrounds, experiences, and perspectives. Engagement with diversity in the curriculum, in our co-curricular offerings, and all other aspects of the College enhances the personal and intellectual growth of all members of our campus community. XXXX is committed to strengthening communities, including our workplace, by fostering the development of the intercultural competencies necessary for meaningful citizenship in an increasingly complex, pluralistic society.

Complex Director

The Complex Director for Sophomore Experience (CD) is a 12-month live-in appointment and is a frontline manager/educator of the student population in one or more residence halls. A primary focus of the CD is the development of a residential theme area which includes the sophomore year experience. This includes working to design a program to prevent a "sophomore slump" by providing support, events and activities which address challenges commonly experienced by sophomore college students. Other responsibilities of the CD include the supervision, training, and management graduate assistant staff (Resident Director), and undergraduate student staff; community development initiatives; working with high risk students and special academic communities; judicial agent/referral officer; hall council advisement; facilities management; 24-hour crisis intervention; educational and social programming for the residential population; and a special committee assignment. Included among work and on-call responsibilities are emergency and crisis response duties, including those that occur after traditional business hours and on weekends. Summer positions will be assigned, such as summer hall director, conference director, or roles in other summer projects.

The 12-month live-in position is limited to a one (1) year renewable term appointment, for a maximum of four (4) years, contingent upon a successful annual performance review. The positions provide an on-campus apartment and full meal plan during the fall and spring semesters.

Required Qualifications:

Master's Degree; previous supervisory responsibility and management of paraprofessional resident assistant staff; knowledge of communication and counseling skills; ability to communicate effectively within a diverse population of students, faculty and staff; proficiency in Microsoft Office and Publisher.

Preferred Qualifications: Master's Degree in college personnel administration, higher education, or college counseling and development. Post master's degree experience in residence hall management. Demonstrated experience supervising graduate assistant staff in a college/university setting. Demonstrated experience coordinating judicial conduct hearing.

APPENDIX B
PERMISSION TO UTILIZE VICARIOUS TRAUMA SCALE

Lynell Hodge

From: Lil Vrklevski <Lil.Vrklevski@sswhs.nsw.gov.au>
Sent: Tuesday, April 05, 2016 3:39 AM
To: Lynell Hodge
Subject: RE: Vicarious Trauma Scale

Dear Lynell,
You have my permission and support to use the VTS. Please let me know the outcome of your research and my best wishes with the dissertation.
Regards, Lil

From: Lynell Hodge [lynell.hodge@knights.ucf.edu]
Sent: Tuesday, April 05, 2016 1:01 PM
To: Lil Vrklevski
Subject: Vicarious Trauma Scale

Hello Ms. Vrklevski,

I am currently a doctoral student working on my dissertation with staff emotional intelligence and vicarious trauma exposure in higher education. In my literature review I have cited your research of vicarious trauma in of solicitors. The vicarious trauma scale is a crucial piece to my research and would like to ask permission to use the scale in my dissertation. Please let me know if you need any additional information for this request. Thank you for your time!

Lynell Hodge

This email has been scanned for the Sydney & South Western Sydney Local Health Districts by the MessageLabs Email Security System.
Sydney & South Western Sydney Local Health Districts regularly monitor email and attachments to ensure compliance with the NSW Ministry of Health's Electronic Messaging Policy.

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1 (strongly disagree) to 7 (strongly agree)

Item	Scale						
1. My job involves exposure to distressing material and experiences.	1	2	3	4	5	6	7
2. My job involves exposure to traumatized or distressed clients.	1	2	3	4	5	6	7
3. I find myself distressed by listening to my client's stories and situations.	1	2	3	4	5	6	7
4. I find it difficult to deal with the content of my work.	1	2	3	4	5	6	7
5. I find myself thinking about distressing material at home.	1	2	3	4	5	6	7
6. Sometimes I feel helpless to assist my clients in the way I would like.	1	2	3	4	5	6	7
7. Sometimes I feel overwhelmed by the workload involved in my job.	1	2	3	4	5	6	7
8. It is hard to stay positive and optimistic given some of the things I encounter in my work.	1	2	3	4	5	6	7

APPENDIX C
GENOS EMOTIONAL INTELLIGENCE INVENTORY-SHORT



For Students and Researchers

Genos makes available its workplace based emotional intelligence questionnaires free of charge for the purposes of research. Individuals and organisations are strictly forbidden from using these questionnaires for any type of commercial purpose.

There are three versions of Genos EI questionnaires:

- Genos EI Short Inventory (14 items)
- Genos EI Concise Inventory (31 items)
- Genos EI Full Inventory (70 items)

Each version exists in both self-report and rater-report format. The short version of Genos EI yields only a total score. The concise and full versions yield seven subscale scores and one total EI score. The concise version is recommended for research scenarios where a total EI score is of principal interest and there are some exploratory type hypotheses related to one or more of the individual seven dimensions. If there are primary hypotheses relevant to one or more of the seven dimensions, then the full version is recommended.

The basic psychometric properties, as well as the normative sample means and standard deviations, associated with the three versions of the Genos EI inventory can be found in Palmer, Stough, Harmer and Gignac (2009), as well as Gignac (2010). Genos does not make available the normative sample percentile scores. For research purposes, raw scores should be sufficient.

The questionnaires in PDF can be downloaded below. Students and researchers have permission to administer the questionnaires online.

Genos Emotional Intelligence Inventory – Short

Below are a series of 14 statements. Please circle the number corresponding to the statement that is most indicative of the way you typically think, feel and act at work. If you make a mistake simply cross it out and fill in the correct response.

	Almost Never	Seldom	Sometimes	Usually	Almost Always
1. I appropriately communicate decisions to stakeholders.	1	2	3	4	5
2. I fail to recognize how my feelings drive my behavior at work	1	2	3	4	5
3. When upset at work, I still think clearly.	1	2	3	4	5
4. I fail to handle stressful situations at work effectively.	1	2	3	4	5
5. I understand the things that make people feel optimistic at work.	1	2	3	4	5
6. I fail to keep calm in difficult situations at work.	1	2	3	4	5
7. I am effective in helping others feel positive at work.	1	2	3	4	5
8. I find it difficult to identify the things that motivate people at work.	1	2	3	4	5
9. I consider the way others may react to decisions when communicating them.	1	2	3	4	5
10. I have trouble finding the right words to express how I feel at work.	1	2	3	4	5
11. When I get frustrated with something at work I discuss my frustration appropriately.	1	2	3	4	5
12. I don't know what to do or say when colleagues get upset at work.	1	2	3	4	5
13. I am aware of my mood state at work.	1	2	3	4	5
14. I effectively deal with things that annoy me at work.	1	2	3	4	5

Scoring

The following items are negatively keyed and therefore must be reverse coded: 2, 4, 6, 8, 10, and 12.

Psychometrically, the only defensible score that can be calculated from the Genos EI Short-Form is a total score. Therefore, after reverse coding, sum the items from 1 to 14.

See Table 3 (p. 114) from Palmer, Stough, Harmer, and Gignac (2009) for normative information (mean, SD, coefficient alpha) associated with the Genos EI Short-Form scores.

Palmer, B. R., Stough, C., Harmer, R., & Gignac, G. E. (2009). The Genos Emotional Intelligence Inventory: A measure designed specifically for the workplace. In C. Stough, D. Saklofske, & J. Parker (Ed.), *Assessing emotional intelligence: Theory, research & applications* (pp. 103-118). New York: Springer.

APPENDIX D
PERMISSION TO UTILIZE JOB SATISFACTION SCALE

Lynell Hodge

From: Spector, Paul <pspector@usf.edu>
Sent: Thursday, March 24, 2016 9:22 AM
To: Lynell Hodge
Subject: RE: JSS Survey permission request

Dear Lynell:

You have my permission for noncommercial research/teaching use of the JSS. You can find copies of the scale in the original English and several other languages, as well as details about the scale's development and norms. I allow free use for noncommercial research and teaching purposes in return for sharing of results. This includes student theses and dissertations, as well as other student research projects. Copies of the scale can be reproduced in a thesis or dissertation as long as the copyright notice is included, "Copyright Paul E. Spector 1994, All rights reserved." Results can be shared by providing an e-copy of a published or unpublished research report (e.g., a dissertation). You also have permission to translate the JSS into another language under the same conditions in addition to sharing a copy of the translation with me. Be sure to include the copyright statement, as well as credit the person who did the translation with the year.

Thank you for your interest in the JSS, and good luck with your research.

Best,

Paul Spector, Distinguished Professor
Department of Psychology
PCD 4118
University of South Florida
Tampa, FL 33620
813-974-0357
pspector[at symbol] usf.edu
<http://shell.cas.usf.edu/~spector>

From: Lynell Hodge [mailto:lynell.hodge@knights.ucf.edu]
Sent: Tuesday, March 22, 2016 8:04 PM
To: Spector, Paul <pspector@usf.edu>
Subject: JSS Survey permission request

Hello,

I am currently a doctoral student working on my dissertation with staff emotional intelligence and job satisfaction in higher education. The websites indicates the Job Satisfaction Survey can be used for research purposes. I would like to confirm permission to use the survey as one of the measurement tools in my dissertation. Please let me know if you need any additional information for this request. Thank you for your time!

<http://shell.cas.usf.edu/~pspector/scales/share.html>

Lynell Hodge

Introduction

<p align="center">JOB SATISFACTION SURVEY Paul E. Spector Department of Psychology University of South Florida Copyright Paul E. Spector 1994, All rights reserved.</p>							
<p align="center">PLEASE CIRCLE THE ONE NUMBER FOR EACH QUESTION THAT COMES CLOSEST TO REFLECTING YOUR OPINION ABOUT IT.</p>		Disagree very much	Disagree moderately	Disagree slightly	Agree slightly	Agree moderately	Agree very much
1	I feel I am being paid a fair amount for the work I do.	1	2	3	4	5	6
2	There is really too little chance for promotion on my job.	1	2	3	4	5	6
3	My supervisor is quite competent in doing his/her job.	1	2	3	4	5	6
4	I am not satisfied with the benefits I receive.	1	2	3	4	5	6
5	When I do a good job, I receive the recognition for it that I should receive.	1	2	3	4	5	6
6	Many of our rules and procedures make doing a good job difficult.	1	2	3	4	5	6
7	I like the people I work with.	1	2	3	4	5	6
8	I sometimes feel my job is meaningless.	1	2	3	4	5	6
9	Communications seem good within this organization.	1	2	3	4	5	6
10	Raises are too few and far between.	1	2	3	4	5	6
11	Those who do well on the job stand a fair chance of being promoted.	1	2	3	4	5	6
12	My supervisor is unfair to me.	1	2	3	4	5	6
13	The benefits we receive are as good as most other organizations offer.	1	2	3	4	5	6
14	I do not feel that the work I do is appreciated.	1	2	3	4	5	6
15	My efforts to do a good job are seldom blocked by red tape.	1	2	3	4	5	6
16	I find I have to work harder at my job because of the incompetence of people I work with.	1	2	3	4	5	6
17	I like doing the things I do at work.	1	2	3	4	5	6
18	The goals of this organization are not clear to me.	1	2	3	4	5	6

	PLEASE CIRCLE THE ONE NUMBER FOR EACH QUESTION THAT COMES CLOSEST TO REFLECTING YOUR OPINION ABOUT IT. Copyright Paul E. Spector 1994, All rights reserved.	Disagree very much Disagree moderately Disagree slightly Agree slightly Agree moderately Agree very much
19	I feel unappreciated by the organization when I think about what they pay me.	1 2 3 4 5 6
20	People get ahead as fast here as they do in other places.	1 2 3 4 5 6
21	My supervisor shows too little interest in the feelings of subordinates.	1 2 3 4 5 6
22	The benefit package we have is equitable.	1 2 3 4 5 6
23	There are few rewards for those who work here.	1 2 3 4 5 6
24	I have too much to do at work.	1 2 3 4 5 6
25	I enjoy my coworkers.	1 2 3 4 5 6
26	I often feel that I do not know what is going on with the organization.	1 2 3 4 5 6
27	I feel a sense of pride in doing my job.	1 2 3 4 5 6
28	I feel satisfied with my chances for salary increases.	1 2 3 4 5 6
29	There are benefits we do not have which we should have.	1 2 3 4 5 6
30	I like my supervisor.	1 2 3 4 5 6
31	I have too much paperwork.	1 2 3 4 5 6
32	I don't feel my efforts are rewarded the way they should be.	1 2 3 4 5 6
33	I am satisfied with my chances for promotion.	1 2 3 4 5 6
34	There is too much bickering and fighting at work.	1 2 3 4 5 6
35	My job is enjoyable.	1 2 3 4 5 6
36	Work assignments are not fully explained.	1 2 3 4 5 6

APPENDIX E
INSTITUTIONAL REVIEW BOARD APPROVAL LETTER



University of Central Florida Institutional Review Board
 Office of Research & Commercialization
 12201 Research Parkway, Suite 501
 Orlando, Florida 32826-3246
 Telephone: 407-823-2901 or 407-882-2276
www.research.ucf.edu/compliance/irb.html

Approval of Exempt Human Research

From: **UCF Institutional Review Board #1
FWA00000351, IRB00001138**
 To: **Lynell S. Hodge**
 Date: **May 16, 2016**

Dear Researcher:

On 05/16/2016, the IRB approved the following activity as human participant research that is exempt from regulation:

Type of Review: Exempt Determination
 Project Title: VICARIOUS TRAUMA, EMOTIONAL INTELLIGENCE,
 AND THE IMPACT TO JOB SATISFCATION IN RESIDENCE
 LIFE STAFF
 Investigator: Lynell S Hodge
 IRB Number: SBE-16-12246
 Funding Agency:
 Grant Title:
 Research ID: N/A

This determination applies only to the activities described in the IRB submission and does not apply should any changes be made. If changes are made and there are questions about whether these changes affect the exempt status of the human research, please contact the IRB. When you have completed your research, please submit a Study Closure request in iRIS so that IRB records will be accurate.

In the conduct of this research, you are responsible to follow the requirements of the [Investigator Manual](#).

On behalf of Sophia Dziegielewski, Ph.D., L.C.S.W., UCF IRB Chair, this letter is signed by:

Signature applied by Joanne Muratori on 05/16/2016 05:21:49 PM EDT

IRB Manager

APPENDIX F
APPROVAL TO EMAIL SURVEY VIA SEAHO LISTSERV

Lynell Hodge

From: Falon Thacker <fthacker@gsu.edu>
Sent: Sunday, April 24, 2016 6:15 PM
To: Lynell Hodge
Subject: RE: SEAHO Research Distribution

Hi Lynell,

Finally got a response yesterday. The request has been approved! Please send me the message and a link to the survey you'd like sent to the SEAHO membership.

FALON THACKER | RESIDENCE HALL DIRECTOR, PATTON HALL
RESIDENCE LIFE

Georgia State University | [University Housing](#)
Mailing: PO Box 3961 | Atlanta, GA 30302-3961
In-Person: 160 Edgewood Avenue NE | Atlanta, GA 30303
☎: 404-413-1476 | 📞: 404-413-1803 | ✉: fthacker@gsu.edu



LEARNER | RESPONSIBILITY | WOO | COMMUNICATION | POSITIVITY

Consider the environment - please think before you print this email.

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From: Lynell Hodge [mailto:Lynell.Hodge@ucf.edu]
Sent: Wednesday, April 20, 2016 5:28 PM
To: Falon Thacker <fthacker@gsu.edu>
Subject: RE: SEAHO Research Distribution

Thanks Falon! If you can let me know any updates tomorrow that will be great. My defense is scheduled for Friday afternoon, so I will need the morning to come up with a backup plan if Jerry says no. Fingers crossed that he says yes 😊

Have a great evening!

lynell

APPENDIX G
INITIAL EMAIL TO PARTICIPANTS

Initial Invitation email [sent May 20, 2016]

Dear Prospective Survey Participant,

I would first like to thank you for taking the time to read this email. As a current doctoral student at The University of Central Florida (UCF), and I am conducting a research study as part of my doctoral degree requirements. My study is entitled, Vicarious Trauma, Emotional Intelligence, and the Impact of Job Satisfaction in Residence Life Staff. This email is an invitation to participate in this research study. The purpose of this study is to identify the occurrence of vicarious trauma in residence life staff and whether emotional intelligence can be a mitigating factor to impact job satisfaction.

By agreeing to participate in the study, you will be giving your consent for me to include your responses in my data analysis. Your participation in this research study is strictly voluntary, and you may choose not to participate without fear of penalty or any negative consequences. You will be able to withdraw from the survey at any time and all survey responses will be deleted, including the informed consent agreement.

An informed consent agreement will appear on the second screen page of the survey. There will be no individual identifiable information, remarks, comments or other identification of survey participants. All results will be presented as aggregate, summary data. Study results will be available by requests; requests can be sent to lynell@ucf.edu.

If you have questions, concerns, or complaints, or think the research has hurt you, my faculty advisor Dr. Thomas Owens, Faculty Advisor, Interim Executive Director for Research can be reached at (407) 823-0385 or by email at james.owens@ucf.edu.

The survey will last approximately 20 minutes. Your participation will contribute to the current literature on vicarious trauma, emotional intelligence, and job satisfaction of residence life staff members. No compensation will be offered for your participation.

If you decide to participate, you can access the survey from a link at:
http://ucf.qualtrics.com//SE/?SID=SV_4ItaG7WkTVVCHA1

Thank you for your consideration!

Lynell S. Hodge
Doctoral Candidate
University of Central Florida

APPENDIX H
REMINDER EMAIL

Reminder email [sent out on June 6, 2016]

Dear Survey Participant:

Two and half weeks ago you received an e-mail message asking you to participate in a dissertation research study entitled: Vicarious Trauma, Emotional Intelligence, and the Impact of Job Satisfaction in Residence Life Staff. If you have filled out the survey, thank you!

If you have not had a chance to take the survey yet, I would appreciate you taking the time to complete the survey. This survey should take no more than 20 minutes to complete.

Since no personal data is retained with the surveys for reasons of confidentiality, I am unable to identify whether or not you have already completed the survey. The survey will close on Wednesday June 15, 2016 at 11:00 p.m. EST. If you have done so already, please take a few minutes to complete the survey before June 15th, to be included in the data collection. The survey is accessible via this link: http://ucf.qualtrics.com//SE/?SID=SV_4ItaG7WkTVVCHA1

Thank you for your consideration!

Lynell S. Hodge
Doctoral Candidate
University of Central Florida

APPENDIX I
FACTOR ANALYSIS AND COLLINERARITY STATISTICS

Factor Analysis

Variable	EI	VT	JSS
EI_10	0.594		
EI_12	0.546		
EI_13	-0.571		
EI_14	-0.570		
EI_2	0.494		
EI_3	-0.588		
EI_4	0.500		
EI_5	-0.514		
EI_6	0.553		
EI_8	0.647		
EI_9	-0.385		
EI_1	0.360		
EI_7	0.458		
VTS_1	0.389		
VTS_2	0.455		
VTS_3	0.700		
VTS_4	0.812		
VTS_5	0.793		
VTS_6	0.724		
VTS_7	0.767		
VTS_8	0.787		
JSS_1			-0.667
JSS_10			0.434
JSS_11			-0.771
JSS_12			0.782
JSS_13			-0.656
JSS_14			0.709
JSS_15			-0.711
JSS_16			0.783
JSS_18			0.575
JSS_19			0.716
JSS_2			0.708
JSS_20			0.832
JSS_21			0.438
JSS_22			-0.723
JSS_23			0.719
JSS_24			0.743

JSS_25	0.841
JSS_26	0.776
JSS_27	-0.753
JSS_28	-0.765
JSS_29	0.438
JSS_3	0.891
JSS_30	-0.721
JSS_31	0.240
JSS_32	0.689
JSS_33	-0.751
JSS_34	0.840
JSS_35	-0.725
JSS_36	0.548
JSS_4	0.791
JSS_5	-0.800
JSS_6	0.720
JSS_7	-0.718
JSS_8	0.710
JSS_9	-0.794

Collinearity Statistics (VIF)

Variables	VIF
EI_10	1.332
EI_12	1.257
EI_13	1.281
EI_14	1.266
EI_2	1.168
EI_3	1.288
EI_4	1.249
EI_5	1.395
EI_6	1.368
EI_8	1.497
EI_9	1.159
VTS_3	1.649
VTS_4	1.976
VTS_5	2.077
VTS_6	1.720
VTS_7	1.818
VTS_8	1.648

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