

Helping the Helper: Managing Vicarious Trauma From Work

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Abstract

In 2019, I published my dissertation research focusing on the extent Title IX agents in colleges and universities experienced vicarious trauma because these professionals work with individuals who may have experienced trauma. People in the helping professions understand the cost to caring, and professionals who hear clients' (or students') stories of fear, pain, and suffering may feel similar fear, pain, and suffering because they care. With the national average of approximately 50% of women and 60% of men in the United States being exposed to a potentially traumatizing event, it is vital the experiences be shared, to serve as a protective factor. Based on my doctoral research, I have developed and delivered over the past 4 years a variation of workshops to provide helping professionals with basic information and skills to identify and process vicarious trauma. I also explored the additional research learned from conducting these diverse national workshops and shared best practices as gleaned from workshop participants. Readers of this article will increase their knowledge about personal strategies for managing vicarious trauma.

Keywords: trauma, vicarious trauma, helping professionals, best practice, work burnout

In the 1990s, Stamm and Figley determined helping professionals such as law enforcement, military, medical, and social service personnel; emergency responders and disaster relief workers; clergy, mental health professionals, researchers, and policy

professionals experience vicarious trauma (as cited in Courtois, 2002). Employees in helping professions assist others in their time of need on an individual, community, national, or international level (Stamm et al., n.d.). While some professionals working in areas such as Title IX or student conduct may not self-identify as being in a helping profession, the roles they perform serving students and the community align with the responsibilities of other helping professionals.

Bassett (2019) defined Title IX agents as higher education professionals who have direct contact and responsibility for sexual misconduct violations, which include all forms of sexual harassment, sexual violence (i.e., verbal, physical, and sexual assault), sexual discrimination, domestic violence (intimate partner violence), dating violence, and stalking. Due to the gravity of sexual misconduct cases, intimate disclosure, and graphic nature, Title IX agents experience vicarious trauma.

Statement of the Problem

Higher education professionals are not fully prepared or educated about the array of situations they could be exposed to when supporting their clients/students. While it is important educators understand the risk factors and indirect trauma impact such as vicarious trauma to identify, prevent, and/or minimize these effects (Newell & MacNeil, 2010), the field must provide self-care strategies, recommendations, and education to assist helping professionals. Helpers can be found in health care professionals, social service workers, teachers, attorneys, police officers, firefighters, clergy, airline and other transportation staff, disaster site clean-up crews, and others who offer assistance at the time of the event or later (Stamm, 2010).

The research suggests Title IX agents are not knowledgeable on what vicarious trauma is and/or how to manage it (Bassett, 2019). Researchers have suggested other various populations within higher education experience trauma and these professionals are unaware of vicarious trauma or the impact of it. Thus, to fill the gap in education on vicarious trauma, I

designed and developed workshops based on my dissertation research to provide awareness and knowledge while providing resources.

Evaluation Questions

The purpose of the workshop evaluations was to determine if the learning outcomes were achieved. The learning outcomes were:

1. Participants will be able to clearly understand the concept of vicarious trauma and other related terminology as defined from experts in the helping profession.
2. Participants will be able to clearly identify the indicators of vicarious trauma and connect those indicators to their personal experience.
3. Participants will be introduced to numerous assessment tools for processing vicarious trauma.

To support the workshop purpose, the following evaluation questions were explored by way of survey:

1. Please select all the statements that you agree with.
 - By attending this workshop, I am more aware of vicarious trauma as a topic
 - By attending this workshop, I am more aware of vicarious trauma as it relates to my role
 - By attending this workshop, I am able to provide myself and others vicarious trauma assistance and/or support
 - I am grateful that my institutional leadership found this session to be important to present as professional development
 - I found/learned skills that I will use again
 - The workshop was a good use of my time
 - The workshop style served my learning needs
 - The presenter was knowledgeable on the subject matter

- The presenter kept my attention during this workshop
2. How would you best describe this session? Please comment anything you want to share with the speaker.
 3. If you would like the presenter to add your comments to her website, please indicate what you would like published. Testimonials always helps others to understand possible value of this workshop.

Conceptual Framework

The conceptual framework to create the workshops was constructivist self-development theory (CSDT). CSDT provides an outline for understanding individual differences to trauma (McCann & Pearlman, 1992) where individuals create their reality of life through the development of cognitive schemas or beliefs and expectations about self and others (Dunkley & Whelan, 2006). The theory is founded upon a constructivist view of trauma and how an individual's past traumatic events structure how they adapt to trauma (McCann & Pearlman, 1992). There are five aspects of CSDT: (a) frame of reference indicating one's sense of identity, view on self, the world, and/or relationships has been changed or challenged, (b) self-capacities, one's ability to process emotions, feel worthy of love, and loving others has changed or been challenged, (c) ego resources, one's capacity for empathy and self-awareness has been changed or challenged, (d) psychological needs regarding intimacy, esteem, power, trust, safety, independence have been changed or challenged, and cognitive schemes, such as your beliefs, assumptions, expectations of self and others have been changed or challenged, and (e) memory and prospection, examples such as having flashbacks to a situation or your thoughts process as fragmented, disjointed, with or without emotion.

One of the workshop activities allowed participants to better understand the impact of vicarious trauma by connecting qualitative statements disclosed during the research (Bassett,

2019) to the five aspects of CSDT. As reflected by workshop participants, CSDT has been a useful tool for professionals to process and manage their vicarious trauma.

Literature Review

Van Dernoot Lipsky (2009) suggested evaluating helping professionals' response to trauma exposure is critical, because how trauma impacts their work in the present directly affects their work in the future. Stamm (2016) suggested individuals in helping professions include health care professionals, social service workers, teachers, attorneys, emergency response, etc. Higher education professionals are like those in helping professions (Flintoft & Bollinger, 2016), in that they are hearing others' stories of trauma and at times, helping others during a heightened time of their crisis. As such, they are exposed to traumatic disclosure narratives, as a part of their job. While not all higher education professionals may self-identify as being in a "helping profession," the roles many perform serving others align with the responsibilities of other helping professionals.

Experts have indicated vicarious trauma is the emotional residue from working with individuals as professionals who hear trauma stories and become witness to the pain, fear, and terror that trauma survivors' experience (ACA, 2011). Newell et al. (2015) suggested professional understanding of the field of traumatology has evolved over time and therefore is seen as a contemporary concept. Newell et al. (2015) created a terminology and construct timeline in *Clinician Response to Client Traumas: A Chronological Review of Constructs and Terminology*, which provides readers a deeper understanding of the evolution of trauma. As suggested in Bassett's (2019) research, participants were asked if they understood the terminology and definition of secondary/vicarious trauma. The three terms used most frequently and interchangeably are by Figley (1988), who coined the term compassion fatigue, Stamm (2005), who outlined compassion fatigue and secondary traumatic stress, and Pearlman (1995), who developed the term vicarious traumatization.

It is important educators understand the risk factors and indirect trauma effects such as vicarious trauma to identify, prevent, and/or minimize their effects (Newell & MacNeil, 2010). Therefore, there has been a need to examine the correlations of Title IX agents' lived experiences with vicarious trauma. Bassett's (2019) mixed-methods correlational study described Title IX agents as higher education professionals with direct contact and responsibility for sexual misconduct cases. Bassett (2019) suggested Title IX agents were negatively impacted by their work. Of the 253 study participants, 126 (49.61%) shared a story in response to the question, "If you feel that you have experienced some vicarious trauma due to your Title IX case management experience, please share an example of your experience." All 126 responses described feelings or challenges consistent with the indirect effects of vicarious trauma.

The lived experiences of secondary trauma, vicarious trauma, and compassion fatigue have been vastly reported, but few scales purport to measure the phenomenon (Motta et al., 1999). An assessment tool would be helpful to higher education professionals to determine the extent to which they experience vicarious trauma. Stamm (2005) created the standard Professional Quality of Life (ProQOL) scale based on the professional quality of life theory, where the quality one feels in relation to their work as a helper is measured. Professional quality of life incorporates two aspects, the positive, Compassion Satisfaction (CS), and the negative, Compassion Fatigue (CF). Compassion fatigue breaks into two parts, burnout and secondary traumatic stress (STS). STS is often referred to as vicarious trauma (Stamm, 2010). Stamm (2005) also explained STS is a negative feeling driven by work-related trauma. The ProQOL focuses on the individual's lack of well-being, negative attitudes toward work, or work overload (Cieslak et al., 2014). Used for over 15 years and developed with data from over 3,000 people, the ProQOL is well respected in the field of research (Stamm, 2010) and is a tool introduced during the vicarious trauma workshops described herein. The ProQOL, a 30-item self-reporting

instrument, is the most widely used instrument of the positive and negative aspects of helping in the world (Stamm, 2018).

In Bassett's (2019) research, Title IX agents were asked to complete a survey that included the ProQOL and measured the extent to which they felt they had experienced vicarious trauma from their Title IX work. The participants were then provided with the definitions and indicators of vicarious trauma and then re-asked if they felt they had experienced vicarious trauma from their Title IX work. A majority of the participants altered their original answers after the vicarious trauma definition was provided. The data suggested these professionals increased their answers after being educated on the terminology.

Bassett (2019) deduced two reasons why participants increased their understanding of vicarious trauma in the study. One reason was how the participants self-identify to the words "vicarious trauma" and "secondary trauma". One participant indicated, "I think the word 'trauma' is too extreme, but I think I have experienced effects from my work in Title IX that include some of the challenges cited." The second reason was how participants expressed being hesitant to share their experience, also referred to as a disclosure. Participants indicated their lack of sharing disclosures was a feeling of fear of being perceived as weak, incompetent, or not skilled in the profession. One participant stated:

I have felt very hopeless. I would not have ever considered myself an angry person, but I feel more angry than I used to, and much less optimistic. I feel afraid. I have changed my habits—I used to read a daily paper, every single day. I don't do that now. I feel tired a lot. I feel like I can never, ever, do well enough. I can draw a pretty straight line from these feelings to my job.

Additionally, Bassett's data suggested a stigma with the perception of vicarious trauma within the Title IX agent role and higher education as a profession. Bassett posited educating higher education professionals, including Title IX agents, regarding vicarious trauma may serve as a

protective factor and destigmatize the field of trauma. During the vicarious trauma workshops, participants demonstrated their lack of understanding about vicarious trauma and disclosed how they fear sharing the stories of vicarious trauma. Instead of being ashamed by their vicarious trauma, through the workshops I conducted for numerous organizations, participants have been educated on the value of empathy and how to better manage how they process their vicarious trauma.

Methods

The mixed-methods survey focused on the experience of higher education professionals who participated in vicarious trauma workshops. This methodological approach is the most appropriate because the intent was to identify if the workshops provided valuable information and had general workshop effectiveness. Additionally, the evaluation allowed participants to provide disclosures or comments for themes to emerge. The purpose of the workshop was to provide higher education professionals the knowledge and awareness of and some pathways to manage their vicarious trauma.

Research Design and Data Collection

To measure the overall experiences of participants attending seven vicarious trauma workshops during 2021–2023, a survey (see Appendix) was disseminated at the conclusion of the workshop via SurveyMonkey to evaluate their experience. The surveys were submitted anonymously and typically completed within 1 day of the workshops. The participants' experiences were best measured in their open-ended narratives of answering the question, "How would you best describe this session? Please comment anything you want to share with the trainer."

The evaluation was based on the learning outcomes for the workshop and additional qualitative questions pertaining to the participant's feedback such as if the workshop was a

good use of my time, met their learning needs, and if the presenter was knowledgeable on the subject matter and/or kept their attention during the workshop. The learning outcomes included:

1. Participants will be able to clearly understand the concept of vicarious trauma and other related terminology as defined from experts in the helping profession.
2. Participants will be able to clearly identify the indicators of vicarious trauma and connect those indicators to their personal experience.
3. Participants will be introduced to numerous assessment tools for processing vicarious trauma.

The purpose of the workshop assessment was to give me data to improve each workshop. In addition to the quantitative questions, survey participants were asked how they would best describe the workshop and to share any additional information. After receiving robust responses, I decided to also use the data to suggest themes that would aid in applying additional research into practice through semantic analysis. According to Poesio (2000), the goal of semantic analysis is to determine, as much as possible, what participants mean when they share information with a researcher. For example, one participant wrote:

I have this lonely feeling in higher education, like I am drowning in my own sea. This presentation helped me realize that I was not alone in this experience. Feeling burnout is not because we are failing, it is because we are grieving. It helped me change my viewpoint on the workplace and how I can make it positive.

It was important for me to understand that this participant, and others in their similar situations, had to work through their feelings of failure to gain an understanding that what they were really dealing with was grief caused by the vicarious trauma they had and were experiencing.

Another indicated, "I appreciate the time to dig deeper into the trauma that we as student-facing staff are exposed to daily. It became clear it is an occupational hazard." Overall, evaluations suggested the impact of the workshop was favorable and a good use of attendees'

professional development time. These representative quotes confirm the need to increase professionals' protective factors to reduce burnout as well as to continue the much-needed conversation regarding vicarious trauma. This data also revealed the importance of understanding that in addition to helping other people who were dealing with trauma, the care giving professionals should make sure they take care of themselves, so they can continue to care for and about others.

Participants

The target population for this research were attendees of the vicarious trauma workshops. The original intended audience for these workshops were Title IX agents including investigators, coordinators, hearing officers, and student conduct professionals who may have a wide range of professional titles. However, since publication of my dissertation and the COVID-19 global pandemic, interest in the workshops increased and I have since been presenting to staff working in additional areas of higher education, including student affairs, residential life, academic advising and career coaching, student accessibility, and diversity and inclusion professionals in both public and private institutions.

Individuals who coordinated the hosting of the seven workshops were asked to share the workshop evaluation with their colleagues who attended the workshops. The response rate from these selected seven workshops yielded 55.3%. Of the 179 professionals who attended these workshops, 99 completed the evaluations in their entirety.

The sampling for this research were higher education professionals who attended one of the seven vicarious trauma workshops. Since demographics were not asked within the evaluation, the organizers of each workshop helped me understand who attended the workshops (see Table 1). The first workshop was hosted virtually by Bridgewater State University in 2021 for a group of student affairs professionals. The second was also conducted virtually and was hosted by Northeastern University in 2022 for a group of academic coaches.

The third workshop was conducted in-person hosted by Gateway Community College, in 2022. The workshop was open to all Connecticut State College and University system professionals. The fourth workshop was in 2023 for a group of student conduct professionals at the University of Connecticut. The fifth workshop was hosted virtually in 2023 by Connecticut Association of Higher Education and Disability (CT AHEAD) and included representatives from a diverse group of institutions within Connecticut. In 2023, Nebraska State System hosted the sixth workshop where the participants gathered during their professional development retreat and the material was presented virtually. The participants also represented a wide range of universities within the Nebraska State System. The seventh workshop was conducted virtually in 2023 to a group of master level higher education student affairs students at the University of Colorado, Colorado Springs.

Table 1

Workshop Details

Workshop	Date	Host	Participants	Modality
1	2021	Bridgewater State University	Student affairs professionals	Virtual
2	2022	Northeastern University	Academic coaches	Virtual
3	2022	Gateway Community College	Connecticut State College and University system professionals	In-person
4	2023	University of Connecticut	Student conduct professionals	In-person
5	2023	Connecticut Association of Higher Education and Disability (CT AHEAD)	ADA professionals within Connecticut	Virtual
6	2023	Nebraska State System	Nebraska professional development retreat	Virtual
7	2023	University of Colorado	Master level higher education student affairs students	Virtual

Findings

This evaluation explored the extent to which higher education professionals understood vicarious trauma and to what extent educating them on vicarious trauma increases their awareness of and pathways to manage their vicarious trauma.

My analysis of the workshop evaluations revealed:

- Ninety-four percent (93%) of respondents indicated they became more aware of vicarious trauma as a topic.
- Ninety-four percent (93%) indicated they became more aware of vicarious trauma as it relates to the roles of the participants.
- Ninety-four percent (93%) indicated they are able to provide themselves and others vicarious trauma assistance and/or support.
- Ninety-six percent (95%) of respondents indicated they learned skills and tools they will use again.

Additionally, participants shared their appreciation for the material and expressed a desire for more training. The open-ended question for the survey was, "How would you best describe this session," the terms that appeared the most on the evaluation were either insightful, informative, or engaging. As an example, one respondent wrote:

I thought that this session was very informative! I had always wondered about vicarious trauma but never had the language to describe it so this was a very helpful in doing that. I just wish we had more than an hour because we were given a lot of information at once. But overall, this was awesome, thank you!

Some participants added other positive responses. One participant wrote the workshop was "an emotionally intelligent and culturally competent approach to education!" Another participant indicated:

I appreciate the time to dig deeper into the trauma that we as student-facing staff face every day. It became clear it is an occupational hazard and I would have loved to hear more about what kept the speaker in higher education for so long (as it seems like burn out is more prevalent than ever).

These findings suggest the need for continued conversation with higher education professionals regarding vicarious trauma.

During the seven workshops, an average of three participants disclosed the workshop was the first time anyone had educated them on the understanding and evolution of vicarious trauma. One attendee stated, "I thought the session was informative. Before attending this presentation, I had never heard of vicarious trauma." Another participant stated, "[This is] something many of us experience but this is the first time I had heard it has 'a name' and have someone explain it."

At least one participant per workshop had shared they had never been introduced to Stamm's (2010) ProQOL prior to the workshop. While it was not a question on the survey, attendees verbally shared their excitement to learn about this helpful tool. Attendees who had been introduced to the ProQOL expressed a deeper appreciation for how the tool can help to serve higher education professionals.

On numerous occasions, participants of the workshops asked if there is a double impact on the professional if they themselves have experienced the type of disclosure they are also hearing on a secondary level. Further research is needed to understand the intersection of Post-Traumatic Stress Disorder (PTSD) and lived direct trauma with the secondary trauma heard from work.

Discussion

The overall concept of professional quality of life is complex because it is associated with characteristics of the work environment (organizational and task-wise), the professional's

personal characteristics, and the individual's exposure to primary and secondary trauma at work (Stamm, 2010). Other research has suggested the COVID-19 global pandemic has had devastating effects on the mental health of many (Latsou et al. 2022). Overall, Bassett (2019) showed higher education professionals are not being educated on vicarious trauma, which would help address the effects of COVID-19. The results from this research indicate higher education professionals are suffering from different forms of vicarious trauma, many without understanding what is happening to them. The workshops I implemented in this study showed higher education professionals do not have to suffer alone, and they and their institutions have tools and training available to help. It is critical the people who help students and employees at higher education institutions become aware of and positively deal with vicarious trauma. For higher education professionals to be at their best when they are suffering on their own, they (we) all need to work together to become the strong professionals our students and staff need in their lives at schools across our nation.

Obviously, workshops like the ones I have been presenting must continue to inform and give ideas of how to address vicarious trauma. That, though, should be the starting point for institutions of higher education. I believe each institution must develop other ways to help professionals in the field. Awareness is just the first step in learning how to reduce the negative impact of vicarious trauma and prevent burnout. Programs of education, help, and support must become part of the culture of every higher education institution, so each helping professional has ongoing opportunities to process and regather their emotional strength. It is vital higher education professionals learn how to effectively deal with the trauma disclosed to them and their own vicarious trauma. University and college professionals do not have to suffer in isolation; there are processes and tools available to help us all.

Limitations

The survey was given to all participants and the data revealed what those who participated in the survey believed. The results are valid for this population, and other participants that did not fill out the survey may have other opinions. of this study should be interpreted with the following limitations in mind. The responses from my participants validated the need for more conversation and research regarding vicarious trauma.

The seven workshops discussed in this study varied in delivery modality and included both in-person and virtual delivery. Additionally, some of the trainings were an hour long while others were full day events. This inconsistency could have impacted what and how participants learned the information.

Lastly, the evaluation was not required of every participant. Those who did not complete the evaluation may have had difference experiences than those who did. Increasing the evaluation response rate could provide a more accurate picture of participants' experiences.

Recommendations for Practice and Research

Individuals, institutions, and professional networks need to bring the topic of vicarious/secondary trauma into the higher education curriculum with trainings, conferences, and graduate programs. While equity, inclusion, and Title IX work is often compliance-focused, each institution's leadership team should also understand the emotional stress caused by working with clients/students of trauma, and best practices need to be established and embraced to manage vicarious trauma. These workshops have demonstrated the need for widening the audience for this conversation. The data suggest other higher education functional areas do benefit from understanding the impact of vicarious trauma.

Recommendations for Practice

I have the following recommendations for institutions of higher education to consider:

- Create a committee to review positions in which employees interact with any constituents who have to deal with trauma (e.g., wellness center, Title IX offices, dean of students, advisors) and develop ongoing systems to check in with and offer opportunities to debrief with professionals in the field.
- Create training for all personnel who interact with students or school personnel who may have to deal with trauma.
- Develop a phone hotline for any constituent who may need emergency assistance.
- Develop and train all personnel about procedures for working with people in need and contact information.
- Train all instructors to develop skills in inclusive and trauma-sensitive teaching and learning practices.
- Develop and implement practices that ensure equity by decolonizing language, research, teaching and learning practices, policies and procedures, and day-to-day interactions in the institution.

Recommendations for Research

I recommend further research is needed to:

- Understand the intersection of PTSD and lived direct trauma and secondary trauma heard from clients/students.
- Track the participants to determine if the tools that they were taught during the workshops are being implemented.
- Verify whether or not these tools are helping to manage vicarious trauma.
- Understand if vicarious trauma is an additional aspect impacting why higher education colleagues are leaving the field. Since COVID-19, the boundaries of work and life have shifted to non-traditional work hours and higher education leaders believe contribute to professionals leaving the field (Desjardins, 2022). In fact, the

U.S. Department of Labor (2021, January) estimated that in the 2020 academic year, 650,000 employees left the field of higher education either by choice, by layoff, or by termination.

- Determine if more effective programs might be developed according to demographics.

Conclusion

I created interactive workshops to deliver the tools needed to address higher education professionals, as research suggests they are not taught about their work vicarious trauma. After completing my dissertation, I developed and conducted these workshops to increase professionals' awareness of this important issue. Because of the impact of the COVID-19 global pandemic on higher education work and those doing it, demand for the workshops increased and were presented in a virtual setting, requiring the delivery of information to be presented in a creative manner. The most recent workshops demonstrated a post-COVID-19 hunger for understanding vicarious trauma and preventing burnout. Professionals have expressed they want to see institutional leadership invest in professional development around this topic.

My final message to higher education professionals is to not be ashamed of vicarious trauma. An essential statement that was unpacked during the workshop was provided by Dr. Tana Bridge, a higher education professional, who stated "The only people that are impacted by vicarious trauma are people that care" (as cited in Bassett-Cameron, 2023, p. 19). All helping professionals should acknowledge vicarious trauma as a symbol of empathy and should only concern themselves with mitigating the negative effects of vicarious trauma and burnout. Sharing their experiences with others is a strong tool for managing vicarious trauma. Addressing issues such as overworking, poor time management, and skipping lunch, and practicing self-care are some ways to address vicarious trauma. By not addressing vicarious trauma, colleges and universities risk losing quality staff who provide essential support to students.

Care-giving, professional staff are critical to helping all our students deal with the traumas of life in positive ways. The world is trying to recuperate from the traumas caused by the pandemic. Higher education helping professionals are dealing both with their own stressors from the pandemic and the stressors and trauma experienced by our students and staff. Institutions of higher education have a moral responsibility to support those people charged with helping others in our higher education system. The health and wellbeing of our helping staff must be a major goal for each institution, so our students, faculty, and staff have the support they need to move forward in positive and productive ways. We simply cannot afford to lose our helping staff, because we choose to pretend that their needs are not as important as the needs of the people they serve.

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Appendix

Workshop Survey

1. Please select all the statements that you agree with:
 - By attending this workshop, I am more aware of vicarious trauma as a topic
 - By attending this workshop, I am more aware of vicarious trauma as it relates to my role
 - By attending this workshop, I am able to provide myself and others vicarious trauma assistance and/or support
 - I am grateful that my institutional leadership found this session to be important to present as professional development
 - I found /learned skills that I will use again
 - The workshop was a good use of my time
 - The workshop style served my learning needs
 - The presenter was knowledgeable on the subject matter
 - The presenter kept my attention during this workshop
2. How would you best describe this session? Please comment anything you want to share with the speaker.
3. If you would like the presenter to add your comments to her website, please indicate what you would like published. Testimonials always helps others to understand possible value of this workshop.