I was born on the lands of the Kwantlen people and was raised on the lands of the Semiahmoo people. My college years were spent on the territory of the Leni Lenape people, and I now work on the traditional territory of the Halq'eméylem-speaking Stó:lō peoples. It is a privilege to be here on Sto:lo Temexw (Our Land; Our World) but I recognize that you are joining today from a variety of places so I'd ask that you take a moment to reflect on where you are.
Hi, I'm Kyle Baillie

20+ YEARS IN STUDENT AFFAIRS

ED.D. UNIVERSITY OF KANSAS, EDUCATIONAL LEADERSHIP & POLICY STUDIES

EXECUTIVE DIRECTOR, STUDENT AFFAIRS AT UFV
A bit more about me...

HE/HIM/HIS

SPOUSE TO ALI, DOG-DAD TO FERGUS

MOUNTAIN BIKING, SKIING, BAGPIPING
Hi, I'm Fergus
HE/HIM/LORD OF THE MANOR
FRENCH BULLDOG
LIKES SNACKS, BELLY SCRATCHES & SLEEPING IN FRONT OF THE FIRE
Inigo's guide to introductions

POLITE GREETING

NAME

RELEVANT PERSONAL LINK

MANAGE EXPECTATIONS

HELLO. MY NAME IS INIGO MONTOYA
You killed me father.
Prepare to die.
Housekeeping

01 RECORDING & SLIDES
The presentation and slides will be recorded and available to all participants.

02 CHAT
The chat is available, if I'm going too fast, if you have a question, or want to profess your love of French Bulldogs, please feel free to do so here.

03 TRIGGERING INFORMATION
I am going to keep triggering information to a minimum. We will be discussing symptomology, I will give a warning before going into that section.
WHAT IS STUDENT AFFAIRS WORK?
"INDIVIDUALS WHO INFORM, ORIENT, ADVISE, CHALLENGE, SUPPORT, AND GUIDE STUDENTS THROUGH A MYRIAD OF DECISIONS DURING THE POST-SECONDARY YEARS. STUDENT SERVICES PROFESSIONALS HAVE COME TO ASSUME A MAJOR ROLE IN SUCH CONCERNS WHILE FACILITATING STUDENTS’ TRANSITION, MATRICULATION, AND PROGRAM SUCCESS." (COX & STRANGE, 2010)
"PEOPLE WHO HELP STUDENTS ENTER, ENJOY, ENDURE AND EXIT FROM COLLEGE" (DELWORTH & HANSON, 1980)
1. Articulate a personal philosophy of academic advising;
2. Create rapport and build academic advising relationships;
3. Communicate in an inclusive and respectful manner;
4. Plan and conduct successful advising interactions;
5. Promote student understanding of the logic and purpose of the curriculum;
6. Facilitate problem solving, decision-making, meaning-making, planning, and goal setting; and
Best Practices in Advising

• Take ownership of (celebrate!) your role in students' success
• Build relationships and learn to read between the lines
• Make the time
• Play the long game
• Know when and where to refer

(Jackson, 2019; Thomas & McFarlane, 2018)
Students don't fail Calculus because it's hard. They fail Calculus because life is hard and they don't know how to deal with it.
Counselling appointments +

Student loans +

Emergency grants +

Early Assist referrals +

Food Bank usage +

Late withdrawal requests +
<table>
<thead>
<tr>
<th>Trends</th>
<th>MENTAL HEALTH</th>
<th>GENDER BASED VIOLENCE</th>
<th>RACIALIZED VIOLENCE</th>
</tr>
</thead>
<tbody>
<tr>
<td>MENTAL HEALTH</td>
<td>Dramatic increases in mental health numbers and complexity</td>
<td>25% of female students will experience GBV at some point in their academic career</td>
<td>Racialized violence growing over the past four years</td>
</tr>
<tr>
<td>GLOBAL CONFLICT</td>
<td>There are a number of recent or active conflicts in places our students call home</td>
<td>CLIMATE CRISIS</td>
<td>COVID</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Extreme weather events: Fires, floods, earthquakes, droughts...</td>
<td>Going on three years of a global pandemic</td>
</tr>
</tbody>
</table>
Back in the Day...

More hair
Less blood pressure
Fewer 3am phone calls
Slept better
Ate better, exercised more
When you started your Student Affairs career, what training did you do?
What's in a Name?

- Compassion Fatigue
- Vicarious Trauma
- Secondary Trauma
- Burnout
Secondary Trauma Vs Burnout

BURNOUT

"A response to prolonged exposure to demanding interpersonal situations and is characterized by emotional exhaustion, depersonalization, and reduced personal accomplishment" (Maslach et al., 2001)

- Emotional exhaustion
- Large caseloads
- Feelings of reduced personal accomplishment
- Prolonged vs single incident

Symptoms include:

- Low energy
- Chronic fatigue
- Weakness
- Emotional exhaustion
- Helplessness
- Negative attitudes towards self, work and life itself

(Daley, 1979; Pines & Aronson, 1988)
What is Secondary Trauma?

Secondary Trauma

“The natural and consequent behaviors and emotions resulting from knowing about a traumatizing event experienced by a significant other—the stress resulting from helping or wanting to help a traumatized or suffering person” (Figley, 1995)
What is Secondary Trauma?

PRIMARY TRAUMA

"The unique individual experience of an event or enduring conditions, in which the individual's ability to integrate his/her emotional experience is overwhelmed, or the individual experiences (subjectively) a threat to life, bodily integrity, or sanity” (Pearlman & Saakvitne, 1995)
CONSTRUCTIVIST SELF DEVELOPMENT THEORY

“Significant disruptions in one’s sense of meaning, connection, identity, and world view, as well as in one’s affect tolerance, psychological needs, beliefs about self and other, interpersonal relationships, and sensory memory” (Pearlman & Saakvitne, 1995, p. 151)
Inability to remember an important aspect of the traumatic events; persistent and exaggerated negative beliefs or expectations about oneself, others or the world; persistent, distorted cognitions about the cause or consequences of the traumatic event that lead the individual to blame himself/herself or others; persistent negative emotional state; markedly diminished interest or participation in significant activities; feelings of detachment or estrangement from others; and persistent inability to experience positive emotions.

Irritable behaviour and angry outbursts (with little or no provocation) typically expressed as verbal or physical aggression toward people or objects; reckless or self-destructive behaviour; hypervigilance; exaggerated startle response; problems with concentration; and sleep disturbance.

(American Psychiatric Association, 2013)
Avoidance of or efforts to avoid distressing memories, thoughts, or feelings about or closely associated with the traumatic events; and avoidance of or efforts to avoid external reminders (people, places, conversations, activities, objects, situations) that arouse distressing memories, thoughts, or feelings about or closely associated with the traumatic event.

Recurrent, involuntary and intrusive distressing memories of the traumatic event; recurrent distressing dreams in which the content and/or effect of the dream are related to traumatic events; dissociative reactions (e.g. flashbacks) in which the individual feels or acts as if the traumatic events were recurring; intense or prolonged psychological distress at exposure to internal or external cues that symbolize or resemble an aspect of the traumatic events; and marked physiological reactions to internal or external cues that symbolize or resemble an aspect of the traumatic events.

(American Psychiatric Association, 2013)
Symptomology

Identified as:

- a collection of short term and long term emotional and physical disorders;
- strains on interpersonal relationships;
- episodes of sadness and depression;
- sleeplessness;
- general anxiety;
- dreams/nightmares;
- intrusive thoughts;
- loss of objectivity; and,
- inability to form a helping relationship with their clients.

(Allen, 2010; Beaton & Murphy, 1995; Bush, 2009; Cerney, 1995; Conrad & Kellar Guenther, 2006; Dane, 2000; Figley, 1999)
Secondary Trauma & Student Affairs Work

01 Caring Relationship
02 Empathetic Orientation
03 Proximal Distance
STSAP

- Developed by Lynch & Glass (2019) in the US
- 23 Item composite scale
- Uses the DSM-V symptomology as its primary framework
- Includes items from the Secondary Traumatic Stress Scale (Bride et al., 2004) and the Secondary Trauma Self Efficacy Scale (Cieslak et al., 2013)
- Can be used as a self-monitoring tool
Self Monitoring with the STSAP

NOT A DIAGNOSTIC TOOL

The STSAP measures the subjective somatic presentation of secondary trauma symptoms. It is not a mental health diagnostic tool.

METHOD

Complete the instrument, add up the scores in each section. Each section represents a different DSM-V symptom category. Add all scores and divide by 23 for your total.
Some Study Findings

*Please connect with me if you want to geek-out about data or methods

- The STSAP mean for the study was 2.83
- n=290, α=.94, r-squared = .18
- Quartile cut scores
  - Low <1.79
  - Moderate 1.79-2.83
  - High 2.84-3.69
  - Severe >3.69
- This is a subjective measure: trauma is contextual
- Not everyone is impacted by secondary trauma in the same way
Some Study Findings

*Please connect with me if you want to geek-out about data or methods

- 13% of participants indicated they planned to leave their role due to secondary trauma
- 9% of participants indicated they planned to leave the field due to secondary trauma
- Similar levels of ST between Canada and US
- 53% of respondents indicated that they had experienced secondary trauma in previous roles
Some Study Findings

- Being Female was positively correlated, and increased risk to ST
- Being Indigenous was positively correlated, and increased risk for ST
- Working in a Case Management function was positively correlated to ST
- Increased Resilience was negatively correlated to ST, and reduced the risk of ST
- Increased Perceived Organizational Support (POS) was negatively correlated to ST.
Self Care is more than a Bubble Bath...
As seen in a recent job post...

“Must have experience and resilience to avoid effects of vicarious trauma, including attentiveness to self-care and emotional self-management.”

“Must be capable and skilled in hearing disclosures of traumatic experiences and dealing with potential issues of self-harm and suicidality that may emerge.”
Recommendations

01  SELF AWARENESS

02  COMMUNITY CARE

03  ORGANIZATIONAL SUPPORT
Self Awareness

- Take the STSAP
- Be intentional in building awareness
- Start the conversation
- Generate understanding
Community Care

- Destigmatize
- Check in with your peers
- Be intentional with supervision practices
- Generate understanding
- Support & Advocacy
Organizational Support

- Create safer workplaces
- Address workplace threats
- Host training & workshops
- Offer peer & external supports
- Regulate caseloads
- Establish appropriate case/crisis debriefing practices
- Provide personal days and honour off-work times
- Don't make easy work, hard
- Focus on developing resilience and perceived organizational support
- Further research
"This guy's walking down the street when he falls in a hole. The walls are so steep he can't get out.

A doctor passes by and the guy shouts up, 'Hey you. Can you help me out?' The doctor writes a prescription, throws it down in the hole and moves on.

Then a priest comes along and the guy shouts up, 'Father, I'm down in this hole, can you help me out?' The priest writes out a prayer, throws it down in the hole and moves on.

Then a friend walks by, 'Hey, Joe, it's me can you help me out?' And the friend jumps in the hole. Our guy says, 'Are you stupid? Now we're both down here.' The friend says, 'Yeah, but I've been down here before and I know the way out.'"
Questions & Comments
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References


References


References


