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A Study Of The Perceptions Of Pastoral Crisis Intervention As A Crisis Debriefing Strategy Among Resident Directors At Select Catholic Colleges And Universities

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A STUDY OF THE PERCEPTIONS OF PASTORAL CRISIS INTERVENTION
AS A CRISIS DEBRIEFING STRATEGY AMONG RESIDENT DIRECTORS
AT SELECT CATHOLIC COLLEGES AND UNIVERSITIES

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BA (Regis College) 2003
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A STUDY OF THE PERCEPTIONS OF PASTORAL CRISIS INTERVENTION
AS A CRISIS DEBRIEFING STRATEGY AMONG RESIDENT DIRECTORS
AT SELECT CATHOLIC COLLEGES AND UNIVERSITIES

Abstract

This dissertation examined the postcrisis intervention preferences of a purposeful sample
of 23 Resident Directors from 17 Catholic colleges and universities in New England. Using
survey and interview data, this study explored whether Resident Directors at the sample
institution had preferences regarding services they needed following exposure to a student death
and whether these support preferences were aligned with the Catholic identities of their
institutions. The research questions that guided this study were: (a) How do Resident Directors at
Catholic colleges and universities describe their roles as first responders during a campus crisis?,
(b) How do Resident Directors at Catholic colleges and universities identify and describe the
support they need following crisis?, (c) How do Resident Directors at Catholic colleges and
universities interpret the pastoral element of their institutional identity as part of a postcrisis
support strategy?, and (d) Is there a crisis debriefing strategy that is preferred by Resident
Directors who have experienced a campus crisis?

Findings indicate that Resident Directors are susceptible to compassion fatigue on a chronic
basis. For those that have experienced a crisis, the findings suggest preferences towards
community and peer-centered support services, with an emphasis on time off. Data does not
indicate a preference towards pastoral crisis interventions with campus ministry staff, despite a
positive association with religious gatherings. Whereas the community element of the Catholic institutions were identified as a positive asset, meetings with individual clerical staff were not identified as a specific postcrisis preferences. This study may support student affairs administrators in their supervision of Resident Directors on their campuses in understanding the stressors of these positions and the impacts on work performance and staff retention. This study may also assist Catholic institutions of higher education in their assessment of how mission-driven practices influence employee impressions and attitudes.
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Doctor of Education
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This achievement is possible in great part because of my family, the entire Phaneuf and Bertonazzi village. Thank you for the constant encouragement; you have each in your own way provided support and assistance throughout this process.

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Mom and Dad- this is for you.
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CHAPTER 1

INTRODUCTION

Residence life programs on college campuses contribute to the vitality of their institutions in multiple ways. Developmentally, residence life programs offer students environments that foster independence, maturity, self-awareness, competence, and spiritual growth (Chickering, 1969, 2006). Furthermore, residential programs play a critical role in the financial stability of colleges and universities (Li, Sheely, & Wahlen, 2005; Oguntoyinbo, 2011; St. Onge, Ellett, & Nester, 2008; Tinto, 1993). A prosperous residence life program positively impacts the campus community, the student experience, and the financial climate of the institution. Staffing is therefore an important consideration when assessing the viability of a residence life program (Li, Maximova, Saunder, Whalen, & Shelley, 2007). Resident Directors are charged with maintaining a residence hall experience that is conducive to student development and student retention. The role of a Resident Director is multifaceted and valuable on a college campus. The responsibilities include the daily monitoring of their residence halls, serving as conduct officer, supervising student employees and student organizations, and acting as emergency response personnel during times of crisis (Davidson, 2012).

Within a student affairs division, Resident Directors are comparable to first-responders in an emergency response model. Called upon after a crisis, they are tasked with facilitating the initial response to a campus tragedy as part of a death response team (Rickgarn, 1987; Streufert, 2004; Walbert, 2008). Dyergov (1989), Mitchell (1983), and Everly and Mitchell (2000) suggested that rapidly deployed support following a crisis reduces trauma and staff attrition following a crisis. According to Kalia (2002), staff members who are supported in the workplace were more likely to be retained following a work-related incident.
According to Turner, Leno, and Keller (2013), incidents of student death on campus are relatively low compared to national mortality rates. However, their research concluded that illness, suicide, and accidental deaths were the leading cause of death among the sample of college students. When these deaths occurred, 33% of the sample first reported these incidents to the dean of students’ office (Turner et al., 2013, p. 34). Although Turner et al. (2013) highlighted the existing organizational structures by which these incidents are reported, Streufert (2004) conversely suggested a lack of comprehensive postcrisis response plans on college campuses following a student death. Specifically, he noted that colleges should incorporate debriefing as part of this postvention protocol, remarking that staff may “share their reactions to the death because responding may have caused compassion fatigue or resurfaced past losses (p. 164). Streufert (2004) further proposed that colleges must evaluate the specific resources on their campuses when making these postvention plans.

In this regard, college campuses are poised to engage specific assets when designing postvention strategies. Among Catholic colleges and universities, mission-embedded philosophies exist that align with their faith traditions, even if these institutions are struggling with the nature of that relationship (Gardner, 2006; Hendershott, 2011). Faith has the capacity to serve as a valuable coping strategy during crisis. As it relates to the positive relationship between religious beliefs and the coping skills used following crisis, Pargament (1997) noted the following of those with a faith background,

When events threaten to upset their equilibrium, they often reach out beyond themselves for balance, or they may find that a helping hand is extended to them without asking for it. In either case, the function of the support is the same: to uphold and sustain the person through hard times—to preserve. Religious support comes from many sources. (p. 208)
Pargament (1997) further asserted that in times of crisis, people turn to their faith and their faith communities, highlighting that people are more likely to seek out clergy than other professionals. Subsequently, Pargament (1997) highlighted the reciprocity between clergy and those in crisis, finding that those in crisis sought out ministerial support just as the clergy reached out to those in need of this type of care.

Adapting Pargament’s (1997) theory on religious coping, Catholic colleges and universities possess a workforce that innately prescribes to his concept of “support from many sources” (p. 208). More specifically, Catholic institutions employ campus ministry staff members who may serve as formal and informal counselors during times of crisis. According to Stone, Cross, Purvis, and Young (2003), pastoral crisis intervention, a hybrid intersection of religious support and trauma intervention, may be more effective than Mitchell’s (1983) Critical Incident Stress Debriefing (CISD) model of crisis debriefing. Additionally, research indicates that religious gatherings are positive influences following a tragedy (Ano & Vasconcelles, 2005; McCabe et al., 2007; Pargament, 1997).

Although literature is rich in the areas surrounding the positive effects of religious support as a coping mechanism following crisis, literature is sparse as it specifically relates to the integration of religious coping following a student death on a religious campus (Pargament, 1997). Notwithstanding an organizational and philosophical structure at religious institutions that lends itself to this type of crisis intervention based upon Pargament’s (1997) theory, there is little attention paid to the assessment of how this relationship can aid Resident Directors after a critical incident on campus. The lack of focused study on the lifestyle of Resident Directors suggests a potential failure to adequately address the needs of this critical staff population (Belch & Mueller, 2003; Belch, Wilson, & Dunkel, 2009; Davidson, 2012). While research exists that
evaluates the role that CISD has on first responders, further research is needed on the efficacy of pastoral crisis intervention with Resident Directors. Comprehensive evaluation of the utilization of pastoral intervention among Resident Directors who experience a student death on campus is warranted as residence life programs have a critical role on college campuses.

Statement of the Problem

Notwithstanding their institutional importance, research indicates that Resident Directors are increasingly difficult to hire and retain due to work demands and quality of life issues relative to their job duties (Belch & Mueller, 2003; Belch et al., 2009; St. Onge et al., 2008). The exposure to crisis and the subsequent negative impact that crisis has on work performance are possible contributing factors to this recruitment and retention issue. Pargament’s (1997) research supported that the integration of religion and faith in the coping process is beneficial to those who have been exposed to crisis.

Pastoral crisis intervention is a specific crisis debriefing strategy that engages religious coping within the crisis debriefing process in order to support individuals that have experienced a traumatic incident (Everly, 2000a, 2000b, 2004). However, research has not presently explored the beneficial integration of pastoral crisis intervention among Resident Directors who have experienced crisis on their campus. Within the student affairs division at Catholic colleges and universities, postcrisis support plans for staff may not be maximizing the perceived coping benefits of pastoral crisis intervention that are associated with their institutional identities as a mechanism for providing support and retaining Resident Directors following crisis.

Significance of the Study

This study is important to the field of higher education and educational research for multiple reasons. Principally, through a careful review of the literature, a need has been
identified pertaining to the examination of pastoral crisis intervention within a religious college community. The areas of crisis intervention, pastoral counseling, and Resident Directors have been studied independently, but not in conjunction with each other. Pargament (1997) demonstrated the value of religious coping following a crisis and Hawdon and Ryan (2011) asserted the value of a community-oriented response on a secular college campus following a crisis. The research reviewed surrounding Resident Directors focused on issues of staff retention and the central nature of their role in supporting students (Davison, 2012). Relative to Catholic higher education, contemporary research focuses on support services to students (Estaneck & James, 2007, 2010).

**Background of the Study**

This study originates from the author’s own experience with student loss within a Catholic college context and the observations regarding the integration of campus ministry staff within the Resident Director coping process. On these campuses, the Resident Directors were the first responders. After the campus crisis, the Resident Directors anecdotally appeared more comfortable seeking support from campus clergy than the contracted Critical Incident Stress Debriefing (CISD) practitioners. This observation aligns with Pargament’s (1997) findings that individuals were more likely to pursue clergy for support than outside professionals.

The guiding premise of this study is that Resident Directors are the first responders to campus incidents and are susceptible to the compassion fatigue associated with serving in this role. Recognizing Pargament’s (1997) theory that religion has a positive role in coping, Resident Directors at Catholic colleges and universities may identify campus clergy as a valuable support resource should they wish to engage a postvention debriefing protocol following a student death. In turn, Resident Directors who engage in pastoral intervention may articulate a more favorable
employment experience, irrespective of their long-term plans to remain in higher education. This research study evidences how Resident Directors described their roles in crisis; what Resident Directors described as the needed support mechanisms following crisis; and how the identified support mechanisms relate to the Resident Directors’ relationship with the Catholic identity of their campuses. The assessment of crisis intervention from a pastoral and higher educational lens has implications for further research in any residential or crisis-response environment.

Definitions of Key Terms

*Catholic:* Catholicism, the abridged nomenclature for the Roman Catholic Church, is one of the three main denominations of Christianity.

*Crisis:* Crisis is the intersection of a threat, a surprise, and time in such a manner that disruption occurs (Billings, Milburn, & Schaalman, 1980; Hermann, 1963, 1972; Ulmer, Sellnow, & Seeger, 2010; Zdziarski, 2006). For the purposes of this study, crisis is defined as an unanticipated event in which individual coping mechanisms may be deployed in order to prevail over the perceived crisis. Specifically, the crisis for the purpose of this research is a student death.

*Critical incident:* A critical incident is any actual or perceived stressful event that disrupts an individual or a component of an organization (Flannery & Everly, 2000, p. 119; Harper & Williams, 2006). A critical incident is the precipitating event that leads to a crisis.

*Critical Incident Stress Debriefing:* Critical Incident Stress Debriefing (CISD) is a rapid-response intervention system that happens within 72 hours of a critical incident and is applied to those involved in the incident. CISD is a facilitated, seven-step process of small-group debriefing (Mitchell, 1983; Mitchell & Everly, 1996, 2000).
First responder: For the purposes of this research, a first responder is defined as an individual who embodies a personal and professional aptitude for assisting in crisis situations, and whose role or position requires response to critical incidents. Within this study, the Resident Director is the first responder.

Pastoral intervention: Pastoral intervention is a crisis postvention strategy in which pastoral counselors facilitate a debriefing process that focuses on the application of faith as a coping strategy (Everly, 2000a, 2000b, 2004).

Religious coping: The utilization of religion as source of comfort and support following a stressful life event (Pargament, 1997).

Resident Director: A Resident Director is a full-time, live-in professional staff member within a student affairs division who directly supervises a residence hall, the paraprofessional staff within the hall, and the residential students (Belch & Mueller, 2003; St. Onge et al., 2008).

Purpose Statement

The purpose of this study was to establish if, in the context of their roles and responsibilities as first responders, Resident Directors at a purposeful sample of Catholic colleges and universities identified pastoral crisis intervention as a supportive resource following a student death on campus. This study further examined if these Resident Directors had expectations about faith-based crisis intervention resources due to their institutions’ Catholic identities.

Research Questions

The study evaluates how critical incident debriefing, religious coping, and campus ministry staff on Catholic college and university campuses can be synchronously engaged as a
postvention strategy among Resident Directors who have experienced student death. The research questions that guide this study are:

1. How do Resident Directors at Catholic colleges and universities describe their roles as first responders during a campus crisis?
2. How do Resident Directors at Catholic colleges and universities identify and describe the support they need following crisis?
3. How do Resident Directors at Catholic colleges and universities interpret the pastoral element of their institutional identity as part of a postcrisis support strategy?
4. Is there a crisis debriefing strategy that is preferred by Resident Directors who have experienced a campus crisis?

**Theoretical Framework**

This research integrates three theoretical frameworks: Critical Incident Stress Debriefing (CISD), the role of the residential Catholic college and university within student development, and Pargament’s (1997) theory of religious coping. Although each component is notably distinct, these theories coalesce as the foundation for this research. Collectively, these theories represent various ideologies regarding the value of a religiously oriented crisis response.

Critical Incident Stress Debriefing theorizes that specific and quickly-deployed postvention strategies will minimize the debilitating traumatic responses experienced by first responders following a critical incident. The Mitchell (1983) model of CISD posits that rapid intervention will facilitate coping that enables an individual to return to work more quickly (Dyregrov, 1989; Everly & Mitchell, 2000; Pender & Prichard, 2009). In facilitating a debriefing process, organizations can mitigate the impact of the crisis on their overall operation.
Chickering’s (1969) theory on student development validated the importance of a residence life program on a college campus (Astin, 1984). In no particular sequence, Chickering (1969) theorized that a student will progress through seven vectors during his/her college career: developing competence, managing emotions, moving through autonomy towards interdependence, developing mature interpersonal relationships, establishing identity, developing purpose, and developing integrity. Theoretically, a college will nurture these domains of student development as a student persists at the institution. Chickering (2006) and Ostrander (2004) further noted that promoting spiritual growth increased a student’s overall propensity to engage civically and subsequently improved student retention rates. Attention to the success of residential programs is vital as enhanced retention rates fiscally strengthen an institution (Li et al., 2005; Li et al., 2007).

In this same regard, Estaneck and James (2007, 2010) affirmed that student affairs practitioners within a Catholic university context have the capacity to support and develop their students from the lens of the Catholic faith tradition. Echoing Chickering (2006), the staff at residential Catholic colleges and universities can seamlessly integrate the spiritual dimension to this student development paradigm by engaging their faith identity in the program formation process. While this research does not explicitly explore student development theory, it does hypothesize that Resident Directors within a student affairs domain play a central role in student development as articulated by Chickering’s (1969, 2006) theories, particularly in the context of a Catholic college or university.

Pargament’s (1997) research examined the value of religion as a coping mechanism following stressful and non-stressful life events. He observed that individuals with a positive relationship with faith appeared to cope better than those without a faith background or those
with a negative interpretation of their faith. Pargament (1997) asserted that “people do make improvements in religiously oriented counseling” (p. 388). Pargament (1997) further suggested that, based on Bjorck and Cohen (1993), college students utilized faith as a coping strategy at higher rates than their nonreligious counterparts. Hawdon and Ryan (2011) offered that college campuses are a landscape in which the coping mechanisms following tragedy may be explored. Herein exists an opportunity to explicitly examine these mechanisms within a religious college community.

In the context of higher education, this research recognizes that Resident Directors play a critical role in crisis management, student development, and student retention (Davison, 2012; St. Onge et al., 2008). In addition to engaging students on a co-curricular level, Resident Directors maintain safe communities conducive to living and learning within a campus community. Included within the responsibilities is responding to crises within their residential communities (Streufert, 2004). As members of the professional community within a faith-based institution, Resident Directors are not only exposed to crisis incidents, but also expected to foster developmental communities that will sustain enrollment. Within a Catholic institution, Resident Directors have access to resources that align with the principles and practices of their communities’ religious identities. Regarding crisis intervention and crisis management, Resident Directors may also have the benefit of utilizing these faith-based resources in their ongoing effort to remain as contributing campus community members and employees.

Assumptions

The assumptions that are formed in this study pertain to the purposeful sample of Resident Directors at small and mid-sized Catholic colleges and universities in New England. First, the research assumed that Resident Directors have an articulated role in campus crisis
response. This assumption and the role of Resident Directors in crisis are explored within the research study. Secondarily, the study assumed that a small subset of the purposeful sample experienced a student death on campus and that this death occurred while employed at a Catholic college or university. Furthermore, and adapted from Pargament’s (1997) theory, this research assumed that those employed at these colleges and universities recognized the positive value of the religious identity of the institution and identified the religious identity of the institution as an asset. As the study did not explore the psychological nature of this relationship, this assumption may serve as a platform for additional study. Similarly, this research assumed that the impacted Resident Director had some existing relationship with the deceased student. Finally, this research assumed that the surveyed colleges and universities had an innate concept of the value of a strong residential community, as articulated by Chickering’s (1969) theory.

Conclusion

In conclusion, this study explores the intersection of religious coping, campus identity, campus ministry staff, and Resident Directors on Catholic colleges and universities following a crisis. More specifically, this research examines the way in which traditional Critical Incident Stress Debriefing (CISD) protocols may intersect with pastoral crisis intervention at Catholic colleges and universities that experience the loss of a student. This study begins with a careful review of literature in the areas of Catholic higher education, crisis response, pastoral crisis intervention, crisis in the workplace, and first responders. Following this review, Chapter 3 describes the methodology used to complete this study. Chapter 4 discusses the data analysis, followed by Chapter 5’s interpretation of the data and its implications for Resident Directors within the Catholic higher education community.
CHAPTER 2
LITERATURE REVIEW

In examining the research topic, the reviewed literature focuses upon four central themes of study. The three theoretical concepts explored within Chapter 1 of this study are the foundation for the literature reviewed within Chapter 2. Systematically, the four themes integrate Chickering’s student development theory (1969), Critical Incident Stress Debriefing as a crisis intervention theory, and Pargament’s (1997) theory of religious coping.

The reviewed literature examines the contemporary Catholic college and the relationship between Catholic identity and student affairs. Secondarily, the researcher explores the concept of crisis and how it is defined, so that the research may frame the phenomenon appropriately. Within this same theme, the subsequent literature explores the role of crisis on work performance, the condition that is ultimately being assessed through this research. Within the third theme, the engagement of religion and pastoral crisis intervention as grief coping mechanisms following crisis are surveyed. Included within this theme is the assessment of the role of the college chaplain in a crisis debriefing paradigm. The fourth theme within this literature explores the parallel between the role of Resident Director and that of a first responder, highlighting the critical intersection between crisis response theory, work performance, and compassion fatigue.

The Contemporary Catholic College

At present, Catholic colleges and universities in the United States are actively defining their Catholicity. According to contemporary research (Hendershott, 2011; House, 2010; James & Estanek, 2012), Catholic colleges and universities are assessing what it means to be a contemporary Catholic campus more than 20 years after Pope John Paul II’s *Ex Corde Ecclesiae*
(1990). However, directives within *Ex Corde* are not universally interpreted among Catholic colleges and universities. Instead, these institutions live out their Catholic identities by ways of their mission, permitting campuses to interpret their Catholic experience in a capacity that aligns directly with their community demographics and recruitment strategies (Abelman, 2012; Abelman & Dalessandro, 2009).

**Catholic institution mission and identity.** At the forefront of any college or university is the mission and identity of its campus community. Abelman (2012) noted that, “Institutional vision is the means by which a college or university’s identity, character and worldview are identified” (p. 86). Catholic college mission statements may outwardly reflect their religious affiliations and values. Yet despite these mission and value statements, Catholic colleges and universities are in a constant state of exploration about what it means to identify as Catholic (House, 2010). In fact, Abelman and Dalessandro (2009) indicated in their assessment of Catholic college and university mission statements that, “Catholic colleges and universities do little to welcome students to their institutions, effectively unify the students, faculty and staff, or coordinate their vision of the institution with that of the administration” (p. 105). While displayed and communicated within their campus communities, mission and vision statements on these campuses may not have a universal understanding among stakeholders, such as employees.

As further articulated by Morphew and Hartley (2006), institutional mission and vision have the capacity to direct a campus into its future, while providing reverence to its history and culture. However, while perhaps clearly articulated within the mission statement, the connection to the mission and identity among young staff may not be as obvious. Although informed by these Catholic mission statements, newer student affairs staff may not intentionally engage this ideology from the lens of a Catholic student affairs practitioner. Schaller and Boyle (2006) found
in their small quantitative sample that young professionals were less likely to have a comprehensive understanding of the Catholic intellectual tradition and its role in higher education compared to veteran administrators.

This ambiguity around mission and identity is further compounded by the ongoing movement by Catholic colleges and university to engage laity as their presidents rather than clergy from within the founding order or faith (Gardner, 2006). As institutional leadership makes this clerical shift, institutional leaders find themselves in an evolving state of understanding about what it means to be a contemporary Catholic institution. As such, an assessment of Resident Directors’ perceptions of the importance or influence of this Catholic mission and identity is warranted as a means of evaluating whether the Resident Directors’ impression of support is guided by a pre-existing understanding about Catholic institutions, or rather by the Resident Directors’ own unfamiliarity with those same concepts.

**Catholic mission and identity within student affairs.** Within student affairs, practitioners at Catholic institutions seek to define their work within the greater context of their institutional identities. Recent research focused on Catholic college and university presidential and student affairs leadership as venues for engaging campus community members in a greater dialog about how mission and identity inform their work (James & Estanek, 2012). Abelman (2012) found that mission and identity were not universally communicated among stakeholders on Catholic campuses, and that each campus was unique in its conveyance of its mission. As noted by James and Estanek (1996), student affairs practitioners, by proxy of their roles, were historically expected to shepherd the dialog around mission following the proclamation of *Ex Corde*. Yet, these same practitioners were not necessarily firmly educated about *Ex Corde*. 
In 2007, and in response to the need to provide guidance for those non-clerical administrators, the Association of Student Affairs at Catholic Colleges and Universities (ASACCU) outlined eight key principles specifically for student affairs practitioners within the context of Catholic higher education (Estanek & James, 2007, 2010; James & Estanek, 2012). Guided by *Ex Corde* and the product of collaborative discussion among student affairs administrators, the eight *Principles of Practice* provide a framework for cultivating Catholic identity within the work of student affairs (Estanek & James, 2007, 2010):

1. Welcomes all students into a vibrant campus community that celebrates God’s love for all.
2. Grounds policies, practices, and decisions in the teachings and living tradition of the church. Builds and prepares the student affairs staff to make informed contributions to the Catholic mission of the institution.
3. Enriches student integration of faith and reason through the provision of co-curricular learning opportunities.
4. Creates opportunities for students to experience, reflect, and act from a commitment to justice, mercy and compassion, and in light of Catholic social teaching to develop respect and responsibility for all, especially those most in need.
5. Challenges students to high standards of personal behavior and responsibility through the formation of character and virtues.
6. Invites and accompanies students into the life of the Catholic church through prayer, liturgy, sacraments and spiritual direction.
7. Seeks dialogue among religious traditions and with contemporary culture to clarify beliefs and fosters mutual understanding in the midst of tensions and ambiguities.
8. Assists students in discerning and responding to their vocations, understanding potential professional contributions, and choosing particular career directions.

According to Estaneck and James (2010), the ASACCU Principles "represent the ideals, challenges, expectations, and aspirations of student affairs professionals working at Catholic colleges and universities” (p. 2). The eight principles direct student affairs practitioners toward student-centered practices. The same student-centered practices enwrap social justice, service, compassion, and academic discourse as a framework to uphold the Catholic faith tradition.

Regarding the adoption of the Principles by the ASACCU, James and Estaneck (2012) held that the eight principles serve as a strategic resource for senior student affairs administrators who intentionally seek the integration of Catholic mission and identity within the practical application of their work with students and staff. The authors concluded that when senior student affairs officers actively implemented the eight principles into their daily work, they were in a position to inculcate the tenets of Catholic mission into their work. These tenets included the ideals of social justice, compassion, service, and academic discourse. As Catholic institutions actively deconstruct their identities at the macro level, student affairs practitioners have these specific frameworks to guide them on how to engage their Catholicity within their specific work as campus administrators.

Crisis and Critical Incidents

Resident Directors on college campuses experience campus incidents and crisis as part of their work. Subsequently, central to the discussion of crisis response and crisis response theory on a college campus is the definition of “crisis.” Hermann’s model of crisis refers to crisis as the intersection of a threat, a surprise, and time (Billings et al., 1980; Harper & Williams, 2006; Hermann, 1963, 1972; Ulmer et al., 2010). In this regard, a crisis is an unanticipated situation in
which a planned response is impossible and simultaneously in which the standard of operation is disrupted and a loss is possible. Evolving from Hermann’s model is the concept that a crisis can only exist if it is possible to evaluate the event against a standard or status quo (Billings et al., 1980; Ulmer et al., 2010). As a foundational definition within crisis theory, Hermann’s model of crisis is the framework upon which much crisis research is based. Evolving from this same definition is Harper and William’s (2006) definition of a campus crisis. Like Hermann (1963), they emphasized the unanticipated nature of the event. However, in the context of higher education, Harper and William (2006) further specified that a crisis “disrupts the normal operations of the institution or its educational mission and threatens the well-being of personnel, property, financial resources, and/or reputation of the institution” (p. 5).

Notwithstanding this macrolevel definition, crisis is also an individually designed construct by which what one individual deems a crisis may not be such for another individual. Flannery and Everly (2000) identified a crisis as a stressful and overwhelming event that prohibits effective coping. Reflecting this definition, the present study defines a crisis as an unanticipated event in which individual coping mechanisms may be deployed in order to prevail over the perceived crisis. In some situations, these crises are such that create a disruption to homeostasis is severe enough to impair function (Everly & Mitchell, 2000; Mitchell, 1983; Stone, Cross, Purvis, & Young, 2004). The precipitating event that leads to crisis is a critical incident.

A critical incident is “any stressor event that has the potential to lead to a crisis response in many individuals . . . the stimulus that sets the stage for the crisis response” (Flannery & Everly, 2000, p. 119). While most individuals experience a crisis response following a traumatic event, some may experience prolonged reactions that impede daily functions and routines.
Associated with these disruptions are: sleep disturbances, hypervigilance, reclusion, and psychological trauma, including Post Traumatic Stress Disorder (PTSD) (Everly & Mitchell, 2000; Flannery & Everly, 2005; Kalia, 2002; Mitchell, 1983; Mitchell & Everly, 1996; Richards, 2001). Therefore, when a critical incident occurs, the deployment of specialized intervention techniques may be used to minimize the impact of crisis on function. For the purposes of this study, the critical incident is the death of a student on a college campus. Research also indicates that, as it pertains specifically to death, the impact of the loss is in part contingent on the relationship of that individual to the decedent (Stone et al., 2004). The impact of possible disruption is proportionate to the level of the perceived/actual relationship; this is an area that was assessed within the research.

**Critical incident stress debriefing.** Congruent with Hermann’s (1963, 1972) model and definition of a crisis, Critical Incident Stress Debriefing (CISD) was introduced in 1983 as a mechanism for reducing stress within high risk occupations, such as police officers, emergency personnel, and disaster response teams (Campfield & Hills, 2001; Mitchell, 1983; Mitchell, Sakraida, & Kameg, 2003; Pender & Prichard, 2009). Mitchell’s (1983) model of psychological debriefing is a rapid response model in which the individuals experiencing the crisis receive immediate intervention to minimize the long-term impacts of the incident (Dyregrov, 1989; Mitchell & Everly, 1996; Pender & Prichard, 2009). Mitchell’s (1983) model follows a seven step debriefing process over a 3-to-5 hour period as follows: (a) the introductory phase, (b) the fact phase, (c) the thoughts phase, (d) the reactions phase, (e) the symptom phase, (f) the teaching phase, and (g) the re-entry phase.

Adapted from Lindemann’s (1944) grief studies, CISD operates under the theory that rapid intervention (24-72 hours post-incident) diminishes the likelihood of a prolonged crisis
response and PTSD (Dyregov, 1989; Flannery & Everly, 2000; Irving & Long, 2001; Mitchell, 1983; Regel, 2007). By participating in CISD protocol, those impacted by a critical incident will theoretically avoid emotional/psychological crisis and work functions will be minimally impacted, if at all.

Operationally, CISD is not psychotherapy, but a single-session group approach to traumatic intervention that may or may not segue into formal psychotherapy (Miller, 1999; Seely, 2007). Conducted in a group setting, a CISD session may not be facilitated by a licensed counselor or clinician, but rather a peer-counselor. The potential lack of formal clinical training, coupled with the sensitive nature of crisis itself, makes CISD a controversial, albeit widely used approach.

Recent studies failed to validate the use of CISD as a rapid response trauma intervention (Gray & Litz, 2005; Raphael & Meldrum, 1995; Rose & Bisson, 1998; Rose, Bisson, & Wessely, 2003; Seely, 2007; Wessely, Deahl, Cannon, McKenzie, & Sims, 2003). Moreover, researchers questioned the safety of CISD and hypothesized that CISD may exacerbate the trauma response (Morrison, 2007; Regehr, 2001; Wessely et al., 2003). These critics of CISD suggested that Mitchell seemingly manufactured CISD without substantive literature or research. Subsequently, and with these concerns in mind, an examination of other approaches to crisis response is necessary in order to develop appropriate responses to critical incidents.

**Crisis and workplace support.** Mitchell’s (1983) CISD model and Lindemann’s (1944) grief studies were both rooted in the concept that crisis impacts employee work performance. Critical incidents are viewed as performance-based incidents that make full employee output a challenge (Burns & Rosenberg, 2001). Limited research has noted that employees who received CISD returned to typical employment patterns more quickly than their nondebriefed colleagues.
in certain work environments (Campfield & Hills, 2001). Additionally, CISD is a cost-effective strategy that easily adapts to any organizational structure (Litz, 2008).

When successful, early intervention sustains an employment workforce’s output by preserving the employees’ psychological well-being. Wright and Cropanzano’s (2000) research indicated that well-being is an indicator of job performance. According to their research, employees that were happy and emotionally sustained had more favorable production outcomes in the workplace. Similarly, Dawley, Houghton, and Bucklew (2010) found that those employees within their sample who had a personal connection to the organization persisted within the organization. They accentuated that this connection was achieved through job-fit and the employees’ perception of emotional support within the workplace.

Similarly, and within a residence life setting on a college campus, Davidson (2012) observed that entry-level Resident Directors reported being generally satisfied within their roles. The responsibility falls upon the administrative staff to maintain a culture of satisfaction and care in order to retain Resident Directors (Belch et al., 2009). In the context of a Catholic college campus, examination is justified as to whether the Resident Director’s relationship with the mission and identity of the organization, and the perception of support drawn from that identity, is a positive influence within the crisis-response and postvention support paradigm.

However, despite an understanding of the importance of workplace well-being, conclusive and academically sound research regarding the efficacy of CISD in an employment setting is notably deficient (Campfield & Hills, 2001; Regel, 2007; Wei, Szumilas, & Kutcher, 2010). Additionally, research suggests that CISD in a school setting is flawed and ineffective (Wei et al., 2010). As emphasized by Fawzy and Gray (2007), research around CISD is problematic and plagued with methodological error. However, these authors also noted that room
exists to continue to explore the application of the CISD model of debriefing, suggesting that additional and methodologically controlled research is warranted in order to make a determination about CISD and its benefits and detriments. The present research focused on pastoral crisis intervention, a complementary CISD approach that engages religious coping, within the residential Catholic college and university setting.

**Crisis and critical incident debriefing on the college campus.** College campuses are microcosms of a larger society and experience the same traumas and incidents as mainstream society. Turner et al. (2013) noted that 18 million students were enrolled at American colleges in 2011. In their pivotal study on college student mortality, Turner et al. (2013) found that college campuses are generally safe and experience minimal tragedy. The mass killings of the last decade are truly an anomaly in the overall climate of the American university. Yet, campuses are not immune to tragedies such as death; when a student death does occur, a coordinated postvention response effort is paramount (Callahan & Fox, 2008; Streufert, 2004).

Silberman, Kendall, Price, and Rice (2007) warned of the risks of failing to respond to the specific needs of staff who experienced campus crisis response. The authors observed that in addition to the behavioral and emotional impacts of crisis, these critical incidents negatively impacted productively, increased absenteeism, and contributed to staff turnover among those staff who were directly involved in or who experienced the particular crisis. As discussed previously, intervention is a principal consideration in any plan that is designed to minimize trauma on the individual, and ultimately the workforce.

Despite such recommendations for crisis intervention, research is lacking about the impact of crisis intervention in an educational setting (Morrison, 2007). In addition, literature fails to explore the role of crisis intervention debriefing on college campuses. Hawdon and
Ryan’s (2011) research conducted at Virginia Tech applied Durkheim’s (1933, 1995) theories on community response and observed that individuals with strong social connections to the community were less likely to have tragedy-induced symptoms than those who were socially disconnected. Taking from Durkheim’s theories on the power of positive social forces and symbolic acts, and as demonstrated by the effective community response at Virginia Tech, responses to critical incidents that focus on groups may serve as a valuable resource in dealing with crisis. On a college campus, community gatherings offer a viable option that helps faculty, staff, and students process their grief. As discussed previously, some research addressed the benefit of organizational assistance in mediating turnover after a critical incident (Dawley et al., 2010). These frameworks are based on the value of community have merit in a campus response process.

Critical Incident Stress Debriefing (CISD), the traditionally employed crisis intervention model, is designed to be a short-term, single session meeting (Mitchell, 1983). As such, prolonged community gatherings are not part of the CISD paradigm. This absence may pose an issue for college applications, whereas community gatherings are effective in the postvention stage. Pargament (1997) found that individuals were more apt to seek out religious communities following tragedy; a paradigm that may involve faith-based gatherings. The adaptation of the CISD response model to provide the continuing inclusion of religious/community gatherings and pastoral involvement may offer the beneficial intervention of CISD, in tandem with the support of an ongoing-group response. As will be discussed, pastoral crisis intervention intentionally incorporates the value of a group paradigm.

Whereas CISD remains the industry standard for crisis debriefing, campus populations with religious affiliations may not be intentionally engaging a valuable component of their
identity in the restoration process. Furthermore, religious institutions may be unaware that religious intervention is, in fact, a formal support paradigm that is or is not being actively engaged.

**The Role of Religion in Coping**

The role of religion and coping has been extensively surveyed in recent literature. McCabe et al. (2007) and Pargament (1997) noted that in times of crisis and grief those most directly impacted sought comfort in houses of worship or among the religious leaders within their communities. Pargament (1997) additionally specified that religion is not about adherence to a specific practice, but rather a general theological framework about how one lives and interprets life events. Religious coping is ultimately connected to a greater connection with the sacred and such coping skills are effective if that individual has an alignment with those practices and beliefs.

Expanding upon this concept, Ano and Vasconelles (2005) defined religious coping as “the use of religious beliefs or behaviors to facilitate problem-solving to prevent or alleviate the negative emotional consequences of stressful life circumstances” (p. 464). Employing that definition, research has suggested that those who activate religious belief as a coping strategy during times of grief and stress have lower levels of distress (Ano & Vasconcelles, 2005; Bjorck & Thurman, 2007). Conversely, Becker et al. (2007) failed to find conclusive evidence that verified or refuted such claims. As religion is a personal component of one’s identity, the articulation of one’s beliefs or its perceived value during times of crisis is highly subjective and difficult to assess. Yet, leaders at Catholic colleges and universities have the capacity to engage their religious identities through a crisis intervention technique that allows religiously oriented Resident Directors to feel supported during times of crisis.
**Pastoral crisis intervention.** Pastoral intervention is an additional component of Mitchell’s (1983) CISD Model that integrates traditional crisis intervention with pastoral-based support services (Everly & Mitchell, 2000). This hybrid system of intervention incorporates religious traditions and rituals with the techniques utilized in CISD. Theoretically, pastoral intervention utilizes the belief systems, community structures, and grief coping tendencies of those with a faith background as a forum to navigate a crisis. Notably, this is not a technique that can be activated in all crisis settings or with all populations. Notwithstanding this limitation, religious ceremonies and faith-based coping strategies are worthy of exploration as a means to prevent employee attrition following a critical incident within a community that possesses an articulated relationship to a religious mission.

Pastoral intervention adds an element to the CISD model in which the therapeutic rapport found in religious counseling is applied to a medical model of response (Everly, 2000a, 2000b, 2004). Conceptually, pastoral crisis intervention takes the benefits of religion and integrates them with the perceived benefits of CISD. Best practices indicate that CISD is most effective when applied to a cohesive community or group (Pender & Prichard, 2009). Pastoral crisis intervention utilizes this preexisting faith community dynamic to enhance intervention efficacy. However, much like its CISD predecessor, pastoral crisis intervention is controversial and lacks substantive data (Everly, 2004; Lee, Roberts & Gibbons, 2013). In part, the concerns with religious interventions manifest in the concept of applying a sensitive and often personalized coping mechanisms to a broad population. Therefore, this research focuses on Catholic institutions because these campuses have religiously embedded missions and cultural perspectives that guide their institutional work.
**Campus clergy.** Seely (2007) asserted that crisis intervention facilitators must find the delicate balance between assisting the grieved individual and allowing the individual to naturally grieve. Pastoral crisis intervention is another mechanism by which individuals on a college campus can experience crisis debriefing and facilitate coping. For those with a religious affiliation or faith background, religious gatherings and/or pastoral support may provide venues conducive to grief management. More specifically, on religiously-affiliated college campuses, the traditional presence of chaplains and ministry staff further increases the access to these natural coping strategies. As remarked by Pargament (1997), individuals facing grief are more likely to reach out to clergy than to formal clinical personnel. Whereas Resident Directors in crisis may not be familiar with the counseling staff, they may identify clergy or the religious laity as resources that can lend themselves to providing a certain level of comfort.

As further suggested by Stone et al. (2003), religion alone is not the sole component of the aid gleaned from religious intervention; the availability, mobility, location and flexibility of the pastoral support is critical. Therefore, on a Catholic college campus, the role of a chaplain and ministry staff in a crisis situation is valuable under this criteria, perhaps even more so than the group religious gatherings. Schaper (2004) observed that chaplains show up when waters get deep. When a student commits suicide, in most cases it’s still the chaplain who helps inform the family and counsel the roommate, and perhaps even conducts the funeral. . . . Chaplains work not just with the bereaved, but with the whole institution when it tries to fathom a terrible chance or accident. (p. B24)

Aside from religious service offerings, the presence of religious community members within a campus ministry setting affirms the college’s mission and religious identity. Chaplains, whether formal clergy or laity, are “representative of a faith or a belief serving a group of
people” (Stewart, 2012, p. 3). In the context of crisis response, chaplains are an available resource who can provide a value-added approach to the response (Fair, 2010; Stewart, 2012). More so, these campus ministry individuals are the faculty, staff, ministers, and clergy who intentionally work within the auspices of the greater community’s faith tradition.

However, the reviewed literature does not indicate exactly how effective college chaplains are on a college campus intervening with Resident Directors who have experienced a critical incident. Additionally, Pargament (1997) indicated that the scope of clergy’s formal training and clinical practice is limited. Campus ministry practitioners are not necessarily licensed clinicians. Lack of clarity in the literature supports the need to further analyze the interaction of these ministry staff with Resident Directors during the crisis response period.

The Resident Director as a Campus First Responder

The first responder. Critical Incident Stress Debriefing (CISD) was first developed to specifically address the needs of emergency first responders, such as police, fire, and emergency medical personnel (Everly & Mitchell, 1997; Mitchell, 1983). More recent applications of CISD also include those who experience the secondary levels of crisis exposure (Pender & Prichard, 2009). Within CISD, Mitchell and Everly (2000) referred to these responders as possessing a rescue personality, a set of personal qualities that characterize those most closely involved with crisis response. Criteria within this personality include traits such as calmness, empathy, sociability, dedication, obsessiveness, and being detailed-orientated (Klee & Renner, 2013). A first responder is defined in this research as an individual who embodies a personal and professional aptitude for assisting in crisis situations, and whose role or position requires response to critical incidents. In an emergency response paradigm, the Resident Director on a
college campus is a first responder, often working with campus safety and other campus partners in the initial response to campus incidents (Harper & Williams, 2006).

The Resident Director. A Resident Director is a full-time, live-in professional staff member within a student affairs division who directly supervises a residence hall, the paraprofessional staff within the residence hall, and the residential students (Belch & Mueller, 2003; St. Onge et al., 2008). Resident Directors are critical to the formation of dynamic and safe residential communities on the college campus. Their work is vital in regards to retention, risk management, and student development initiatives. On a college campus, a vibrant residence life program creates an atmosphere conducive to student development in which students can experience independent living within the context of a safe environment that cultivates self-exploration (Chickering, 1969). As evidenced in Tinto’s (1993) foundational study of the role of residence life in retention, campuses with thriving residential programs retain and graduate higher percentages of their students. Subsequently, a deteriorating residential program has broad reaching impacts. A poorly executed residence life program impacts the campus climate, retention, persistence and the financial stability of the institution (Davison, 2012; Li et al., 2005; Schudde, 2011; Tinto, 1993). Appropriate staffing in the Resident Director role is a key contributor to the successful residence life program and student retention (Li et al., 2007).

In addition to serving as an entry-level position for those seeking to work in student affairs, the Resident Director role is also a means for nonstudent affairs practitioners to obtain postbaccalaureate degrees at reduced costs. Ellett et al. (2008) indicated that only 41% of residence life staff planned to remain in the college housing industry within 5 years. Belch and Mueller (2003) cited Blimling (1993), who stated,
Challenges to hiring agents in residence life as well as to the candidates themselves specifically include (a) the decrease in the number of students enrolling in preparation programs, (b) the difficulty in finding qualified personnel, (c) strong competition for the best graduates, (d) policies regarding quality of life issues, (e) the feminization of the profession, and (f) an expectation that staff live in the residence halls. (p. 30)

Similarly, Belch and Mueller (2003) found that 56% of the surveyed Chief Housing Officers (CHOs) hired their Resident Directors at the “last minute” (p. 33). These studies suggested that these Resident Directors were not necessarily seeking a career in higher education or student services, but were rather individuals seeking employment and a means to obtain additional education at reduced cost. Subsequently, the conjecture cannot be made that all Resident Directors overtly embrace the fast-paced, crisis-laden and intense work environment of this role or that they possess an understanding of their role in student development in a residential context.

**Compassion fatigue.** When there is a campus crisis, the Resident Directors are often an integral part of the response plan (Streufert, 2004). Taking from Hendron, Irving, and Taylor (2011), these young professionals are apt to experience secondary trauma or compassion fatigue. Compassion fatigue refers to the stress response and emotional cost of caring for others (Figley, 1995; Slocum-Gori, Hemsworth, Chan, Carson, & Kazanjian, 2011). In the midst of supporting those students who have experienced the trauma, administrators may fail to equally sustain the Resident Director staff. At the expense of triaging the student response to a crisis on campus, there is an unintentional act of dehumanizing the Resident Director staff; an assumption that Resident Directors are immune to the crisis, despite the reality that they may be equally as impacted by the crisis or professionally unprepared to facilitate a response to it.
As noted by Belch and Mueller (2003), residence life departments are facing recruitment and retention challenges for Resident Director staff, often hiring at the last minute, hiring those candidates with little residence life experience, or facing staff retention issues due to quality of life issues. However, the high expectations among these staff remain despite inexperienced candidates. With roles in retention, crisis response, and programming, Resident Directors play a key role in the residential college community (Davisdon, 2012; Paladino, Murray, Newgent, & Gohn, 2005; St. Onge et al., 2008). Within a Catholic college and university student affairs context, Resident Directors may be expected to engage the *Principles of Practice* and the articulated expectations of compassionate care (Estaneck & James, 2007, 2010). Recognizing the staff demographic and the institutional context of the Resident Directors role, the possibility of compassion fatigue is an item that needs assessment.

If the Resident Director is a campus first-responder, then support of these staff following crisis is necessary. Belch et al. (2009) found that Resident Directors, regardless of their propensity to be in the higher education profession, were more likely to be successful if their supervisors created a network of support that addressed their job functions. In this same regard, recent recommendations from the National Association of Student Personnel Administrators (NASPA), the guiding organization for student affairs practitioners, included supporting student affairs staff following campus crisis (Jablonski, McClellan & Zdziarski, 2008). Specifically, NASPA stated that “attention should be given to the student affairs team, as well as counterparts from across campus, to deal with their own psychological and emotional trauma associated with any crisis event” (p. 29). Harper and Williams (2006) suggested that student affairs practitioners should allow space from spirituality among first responders, recognizing that faith “can add a new dimension to crisis response in higher education” (p. 45). Additional research is warranted.
to explore whether Catholic colleges and universities are positioned to integrate their spiritual and mission-based alignments in a capacity that mitigates the impact of compassion fatigue among Resident Directors.

**Summary**

Understanding student development theory, critical incident response theory, the value and flexibility of religious support, and the role of community in a response, the intentional application of pastoral intervention may facilitate the necessary response to best support and retain Resident Directors. Stone et al. (2004) noted that those who regularly attend church have larger support networks than non-churchgoers. More so, these same individuals adapted better to stress because of the care received within those environments. Taking from Durkheim (1933, 1995), these individuals possessed valuable networks during a stressful experience and engaged in symbolic rituals following the crisis.

Theoretically, those who work at Catholic institutions, whether actively attending church or not, are embedded in a mission-centered environment in which some level of pastoral support is part of the community's identity. For those at Catholic institutions, the implementation of a response plan inclusive of pastoral intervention aligns with the NASPA recommendations and the principles outlined by the ASACCU of responding in a capacity that reflects the institutional missions and identities. Resident Directors, central members of this community, may be more willing to receive outreach from on-campus ministry staff within their communities than from specialists or CISD interventionists brought in from the external community. In turn, these crucial first-responders will continue to serve as engaged members of their campuses.

The above literature review includes the various philosophies surrounding crisis and crisis response. A careful exploration of CISD and pastoral intervention demonstrates that the
intentional intersection and application of these two modes of debriefing may have efficacy on the Catholic college campus. Utilizing embedded ministry staff and the innate elements of the Catholic identity may provide the benefits of CISD and the support received from a religious coping mechanism. Resident Directors on college campuses face unique hiring and retention issues related to the nature of the role and the realities of the candidate pool’s long-term goals. Likening the Resident Director to the first responder positions the Resident Director for targeted crisis intervention; Resident Directors on Catholic colleges and university campuses are exposed to an additional layer of support via their campus identities.

An initial review of literature does not indicate that extensive attention has been given to the benefits of pastoral intervention in a residence life setting. Further assessment of these practices is warranted in order to design response protocols that best support Resident Directors following crises, and which subsequently sustain a college’s residence life program. The following methods chapter outlines a study that examined the experience of Resident Directors from a purposeful sample of Catholic colleges and universities in New England. This phenomenological study assessed the experience of Resident Directors who had personal familiarity with a student death on campus. Participants within this purposeful sample shared a singular experience within the Catholic college setting. Taking from Creswell (2013), this research evaluated a common problem in order to gain a deeper understanding of the experience of a specific group. A brief survey and individual interviews provided the data and evidence that reflects the Resident Directors’ experiences surrounding the support needed following a student death on a Catholic campus.
CHAPTER 3

METHODOLOGY

In order to study the experience of Resident Directors at a select sample of Catholic colleges and universities, the researcher used the procedures and methodology outlined in this chapter. A summary of the procedures is also provided.

Purpose of the Study

The purpose of this study was to establish if, in the context of their roles and responsibilities as first responders, Resident Directors at a purposeful sample of Catholic colleges and universities identified pastoral crisis intervention as a supportive resource following a student death on campus. This study further examined if these Resident Directors had expectations about faith-based crisis intervention resources due to their institutions’ Catholic identities. Specifically, the study was designed to seek answers to the following research questions:

1. How do Resident Directors at Catholic Colleges and Universities describe their roles as first responders during a campus crisis?
2. How do Resident Directors at Catholic colleges and universities identify and describe the support they need following crisis?
3. How do Resident Directors at Catholic colleges and universities interpret the pastoral element of their institutional identity as part of a postcrisis support strategy?
4. Is there a crisis debriefing strategy that is preferred by Resident Directors who have experienced a campus crisis?
Phenomenological Methodology

This research study was guided by the qualitative framework of phenomenology. Phenomenology focuses upon the essence of the experience; for the purposes of this study, the shared experience was the support received by a purposeful sample of Resident Directors at select Catholic colleges and universities following a student death.

Merriam (2009) emphasized that interviews are the primary form of data collection in a phenomenological study. The interviews with the Resident Directors were the sources of the narrative data for this study. An electronic survey was used to obtain demographic and frequency data; individual interviews yielded the rich data needed to address the research questions. Creswell (2013) indicated that phenomenology works best when seeking to address problems that can be used to design best practices. This study sought to address problems faced by Resident Directors, and the phenomenological method was effective in inspecting a shared experience.

Population and Sample

The sample for this study was comprised of all Resident Directors employed at 17 Catholic colleges and universities in New England. This population was selected because the researcher was investigating the experience of responding to a student death by Resident Directors at Catholic colleges and universities. Names of addresses of the Chief Housing Officers (CHOs) and the number of Resident Directors on staff at each institution were obtained from the college and university websites. In selecting the participants, the researcher used data from the Integrated Postsecondary Education Data System (IPEDS) and identified 17 Catholic, residential institutions located within New England with campus populations of less than 5,000 students (Appendix A). As a control, colleges and universities of less than 100 residential
students and those institutions that were classified as seminaries were excluded. Within these 17 institutions, participation in the research study was limited to the sample population of Resident Director staff.

The study focused on Resident Directors at Catholic colleges and universities in New England. The sample included Resident Directors of varying faith beliefs, but who all represented Catholic faith-based institutions in their roles and responsibilities. While other faith backgrounds may be represented within the sample’s participants, Catholicism was the primary religious perspective assessed. This research explored the role of Catholic identity on a college and university campus and how the affiliation with this specific religious tradition impacted postcrisis support strategies and the Resident Directors’ perceptions of that support.

**Instrumentation**

Two instruments were used for data collection for the study, one was an electronic survey and the other was interview questions. In addition to demographic information, the electronic survey collected data regarding the sample Resident Directors exposure to a student death, the relationship to the campus mission and identity, the prevalence that crisis intervention may or may not have on the campus, the presence of pastoral intervention, and the general attitudes towards these varied types of intervention strategies (Appendix B).

Survey respondents were provided the opportunity to voluntarily participate in one-on-one interviews with the researcher. The interviews followed a semi-scripted series of both open- and closed-ended questions that addressed four major themes: role in crisis, postcrisis support, the relationship with the Catholic identity of the institution, and future career plans (Appendix C).
Data Collection

Data collection was conducted using two data sources. First, the previously described survey was used to determine population demographics, exposure to student death on campus, preferences around support mechanisms, and attitudes towards campus mission and identity. Second, the interviews, also explained earlier in this chapter, were used to obtain narratives from Resident Directors about their employment experience. A total of 23 Resident Directors employed at 11 of the 17 Catholic colleges and universities completed the survey. Each participant’s survey instrument was coded for the respondents’ institutional identity.

On January 6, 2015, an email outlining the purpose of the study was sent to the CHOs, or similarly operating individuals at each institution (Appendix D). As contact information for all the Resident Directors was unavailable, the survey was sent directly to the CHOs. The email requested their Resident Directors staff’s participation in the research study and included a link to the survey. After 2 weeks, 14 Resident Directors from five institutions had taken the survey. The first return rate was 14.7% (n = 95). When a survey was retuned, the participant code was utilized to verify the respondent’s college or university. On January 30th, a second request to participate was sent to all the CHOs, or similarly operating individuals at each institution. The researcher also directly called the CHOs at institutions with no responses to confirm receipt of the invitation to participate. Following the second notification and telephone call, an additional 9 Resident Directors completed the survey, yielding an overall response rate of 24. Table 1 summarizes the response rate by sample institution.
Table 1

*University Resident Directors Survey Respondents and Percentages*

<table>
<thead>
<tr>
<th>University</th>
<th>Number of Resident Directors</th>
<th>Number of survey respondents</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Albertus Magnus</td>
<td>3</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Anna Maria College</td>
<td>3</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Assumption College</td>
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<td>0</td>
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<tr>
<td>College of the Holy Cross</td>
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<td>57</td>
</tr>
<tr>
<td>College of our Lady of the Elms</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Emmanuel College</td>
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<td>3</td>
<td>50</td>
</tr>
<tr>
<td>Fairfield University</td>
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<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Merrimack College</td>
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<td>Regis College</td>
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<td>33</td>
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<td>Salve Regina University</td>
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<tr>
<td>St. Amselm College</td>
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<tr>
<td>University of St. Joseph (CT)</td>
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<tr>
<td>St. Joseph College of Maine</td>
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<tr>
<td>Stonehill College</td>
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<td>33</td>
</tr>
<tr>
<td>Total</td>
<td>95</td>
<td>23</td>
<td>24</td>
</tr>
</tbody>
</table>
Of the 23 Resident Directors who returned in the survey, 5 Resident Directors voluntarily participated in the interviews. Survey respondents who voluntarily provided email addresses were individually contacted by the researcher in order to schedule a time to participate in the interview. These interviews were conducted over a period of 8 weeks. These interviews were conducted individually over the phone or at a mutually agreeable off-site location. Prior to any data collection, all participants received a comprehensive explanation of the research and signed the Consent for Participation in Research Form (Appendix E). Interviews lasted between 45 minutes and one hour. During the interviews, Resident Directors were asked a series of questions regarding their experiences as Resident Directors following a student death on campus (Appendix C). At the conclusion of the interviews, participants received a $25 gift card.

All interviews were recorded for transcription purposes and recordings were sent to a third party transcription service. Transcripts were checked by the researcher for accuracy and Resident Directors were coded for anonymity. The utilization of a transcription firm in conjunction with the researcher’s notes served as a measure for the trustworthiness and credibility of the data.

Data Analysis

The data collection for this study was analyzed using two methods. Survey data was analyzed for descriptive and frequency statistics using SPSS (v. 22). This analysis provided demographic information to determine frequency of exposure to crisis among the sample, the support services they received, the support services they desired, the perceived importance of the institutional identity as a factor for employment, and their career trajectories. Subsequently, the survey data informed the qualitative interviews.
Interviews were analyzed using a thematic coding system. Following the transcription of the interviews, the researcher identified thematic categories within the data. Participants were coded for anonymity. As stated by Creswell (2013), the “process involves winnowing the data, reducing them to small, manageable set of themes to write into [the] final narrative” (p. 186). This classification analysis supplied the data for the qualitative component of the research, which was informed by the previously collected quantitative data.

Taking from Boyatzis (1998), the development of meaningful labels and codes maximizes the “probability of producing high inter-rater reliability and validity” (p. 31). Following the transcription of the interviews, the researcher synthesized each transcript into a summary. From these summaries, and guided by Boyatzis (1998), key themes were extracted. Once themes were established, a coding key theme directory was developed using a theme structure suggested by Boyatzis (1998) in order to develop labels, definitions, descriptions, and indicators. Using this model, the researcher coded and qualified key themes within the research, using the themes and definitions outlined within the literature review as a framework. The codes that were developed from this process are outlined in Table 2.
Table 2

*Thematic Codes*

<table>
<thead>
<tr>
<th>Code 1</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Label:</strong> Role in crisis response.</td>
</tr>
<tr>
<td><strong>Definition:</strong> The response to an unanticipated incident.</td>
</tr>
<tr>
<td><strong>Description:</strong> The role of the Resident Director in the crisis response process on the college or university campus.</td>
</tr>
<tr>
<td><strong>Indicators:</strong> Coded when a participant states the specific actions he/she did as a campus first responder following a student death.</td>
</tr>
<tr>
<td><strong>Examples:</strong> Document incidents, notify administrator on call, escort to hospital, notify parents, support RAs, stay visible.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Code 2</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Label:</strong> Compassion fatigue as a first responder.</td>
</tr>
<tr>
<td><strong>Definition:</strong> Work related compassion fatigue.</td>
</tr>
<tr>
<td><strong>Description:</strong> The experience of fatigue as a result of job duties.</td>
</tr>
<tr>
<td><strong>Indicators:</strong> Coded when a participant describes a level of exhaustion, burnout, or compassion fatigue.</td>
</tr>
<tr>
<td><strong>Examples:</strong> Burnout, exhaustion, fatigued, tired, overwhelmed.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Code 3</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Label:</strong> Support offered.</td>
</tr>
<tr>
<td><strong>Definition:</strong> Mechanisms to provide assistance to enable function.</td>
</tr>
<tr>
<td><strong>Description:</strong> The services offered to Resident Director staff following a student death on campus.</td>
</tr>
<tr>
<td><strong>Indicators:</strong> Coded when a participant states what support services were offered to him/her after a crisis and by whom those services were offered.</td>
</tr>
<tr>
<td><strong>Examples:</strong> Counseling, time-off, vacation, processing, debriefing.</td>
</tr>
</tbody>
</table>
Table 2 (continued)

**Code 4**

Label: Support used.

Definition: Mechanisms to provide assistance to enable function.

Description: The services wanted by the Resident Director staff following a student death on campus.

Indicators: Coded when a participant states what support services were desired and/or utilized him/her after a crisis and by whom those supports were offered.

Examples: Counseling, time-off, vacation, processing, debriefing.

Exclusion: The Resident Director has not experienced a student death.

**Code 5**

Label: Institutional mission and identity.

Definition: The outward expression of a college or university’s Catholic identity.

Description: The engagement of the institutional mission and identity by the Resident Director following a student death.

Indicators: Coded when a participant states his/her interpretation of the campus mission and its influence on his/her work environment.

Examples: Community, support, mass, gathering, policy, campus ministry, mission, philosophy, founding order (name).

Exclusion: Student death occurred when employed at a secular institution.
Table 2 (continued)

**Code 6**

Label: Pastoral intervention.

Definition: The support provided by religious clergy or personnel following a crisis.

Description: The utilization of pastoral crisis intervention following a student death on campus.

Indicators: Coded when a participant states what specific religious based support was offered and by whom.

Examples: Service, prayer service, mass, individual counseling, reflection.

Exclusion: Resident Director has not experienced a student death.

**Code 7**

Label: Preferred support.

Definition: Mechanisms to provide assistance to enable function.

Description: The preferred services that were identified by Resident Director staff in the future event of a student death on campus.

Indicators: Coded when a participant states what support services would be desired and/or utilized him/her after a crisis.

Examples: Counseling, time-off, vacation, processing, debriefing.

**Limitations**

There were limitations to this study. The first limitation was the researcher’s own position within higher education. While also an identifiable asset, this positioning nonetheless required an awareness of its possible influence. The second limitation was that the pool of participants was small. This research aimed to examine one particular staff within a specific type of institution who may have experienced a student death. Consequently, the ability to get large quantities of data was a limitation. Additionally, at the time of data collection, multiple campuses within the sample experienced staff turnover at the administrative and Resident Director level.
As the survey instrument was distributed by the CHOs to the Resident Directors, instability at the CHO level impacted survey collection. For this reason, this small pool of participants was further validation of an approach that favored a phenomenology.

**Summary of the Procedures Used to Conduct the Study**

The purpose of the study was to establish if, in the context of their roles and responsibilities as first responders, Resident Directors at a purposeful sample of Catholic colleges and universities identify pastoral crisis intervention as a supportive resource following a student death on campus. This study further examined if these Resident Directors had expectations about faith-based crisis intervention resources due to their institutions’ Catholic identities.

In order to conduct the study, the researcher followed the procedures outlined below:

1. Data were collected related to the population of Resident Directors from the 17 Catholic colleges and universities in New England.
2. The population was selected using IPEDs data.
3. Instruments determined perceptions of Resident Directors and frequency of exposure to a student death.
4. An acceptable return rate was established.
5. An email was sent to the CHOs at the 17 Catholic colleges and universities with a link to the survey.
6. A follow-up email was sent at the two week and five week interval to the CHOS.
7. Responses to the surveys were coded.
8. Those surveyed Resident Directors who expressed interest in participating in interviewed were contact by the researcher.
9. Recorded interviews were conducted remotely or in-person at the availability of the participant.

10. Interview recordings were transcribed and identities were coded.

11. Survey data was interpreted and analyzed using SPSS (version 22) software.

12. Interview data analysis of Interviews were transcribed and coded for a thematic analysis.

In summary, Chapter 3 presented the methodology for conducting this study, describing the instrumentation, sample and population, instrumentation, data and analysis techniques. The data derived from the research will be presented in Chapter 4.
CHAPTER 4

ANALYSIS OF THE DATA

The purpose of this chapter is to present answers to the study questions including the results of conducting the survey and the interview questions of select Resident Directors from 17 Catholic colleges and universities. Survey responses were received from 23 Resident Directors and from this population of survey respondents, an additional 5 interviews were conducted and recorded. The respondents from the survey represented 11 of the 17 institutions; the interview participants represented four of the surveyed institutions. The return rate for the survey was 24%, which was considered acceptable.

The four research questions were:

1. How do Resident Directors at Catholic colleges and universities describe their roles as first responders during a campus crisis?

2. How do Resident Directors at Catholic colleges and universities identify and describe the support they need following crisis?

3. How do Resident Directors at Catholic colleges and universities interpret the pastoral element of their institutional identity as part of a postcrisis support strategy?

4. Is there a crisis debriefing strategy that is preferred by Resident Directors who have experienced a campus crisis?

Following an analysis of the transcribed interviews, seven themes were identified based on the codes outlined in Chapter 3: (a) role in crisis response, (b) compassion fatigue as a first responder, (c) support offered, (d) support used, (e) institutional mission and identity, (f) pastoral intervention, and (g) support preferred. Three subthemes within these major themes also emerged as part of the data analysis: (a) response to specific crisis: student death, (b) incident training, and...
(c) relationship with the student. These relationships between the major themes, subthemes and findings are illustrated in Table 3.

Table 3

*Major Themes and Emerged Subthemes and Findings*

<table>
<thead>
<tr>
<th>Theme</th>
<th>Emerged subthemes</th>
<th>Finding</th>
</tr>
</thead>
<tbody>
<tr>
<td>Role in crisis response</td>
<td>Response to a specific crisis: student death</td>
<td>Finding 1</td>
</tr>
<tr>
<td></td>
<td>Incident training</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Relationship with student</td>
<td></td>
</tr>
<tr>
<td>Compassion fatigue as a first responder</td>
<td></td>
<td>Finding 1</td>
</tr>
<tr>
<td>Support offered</td>
<td></td>
<td>Finding 2</td>
</tr>
<tr>
<td>Support used</td>
<td>Relationship with student</td>
<td>Finding 2</td>
</tr>
<tr>
<td>Institutional mission and identity</td>
<td></td>
<td>Finding 3</td>
</tr>
<tr>
<td>Pastoral intervention</td>
<td></td>
<td>Finding 3</td>
</tr>
<tr>
<td>Support preferred</td>
<td>Relationship with student</td>
<td>Finding 4</td>
</tr>
</tbody>
</table>

This chapter presents the findings derived from the data collection and analysis methods described in Chapter 3.

**Research Question 1**

How do Resident Directors at Catholic colleges and universities describe their roles as first responders during a campus crisis?

**Finding 1**

The role of Resident Directors at the 17 sample institutions was described by survey and interview participants. The survey participants were 16 women and 7 men, representing 11
(64.7%) of the 17 sample institutions. Demographic data about the survey respondents are represented in Table 4.

**Table 4**

*Survey Respondent Demographics*

<table>
<thead>
<tr>
<th>Variable</th>
<th>N</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Gender</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Female</td>
<td>16</td>
<td>69.6</td>
</tr>
<tr>
<td>Male</td>
<td>7</td>
<td>30.4</td>
</tr>
<tr>
<td><strong>Age</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>18 to 24</td>
<td>8</td>
<td>34.8</td>
</tr>
<tr>
<td>25 to 34</td>
<td>15</td>
<td>65.2</td>
</tr>
<tr>
<td><strong>Ethnicity</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Black/African-American</td>
<td>1</td>
<td>4.3</td>
</tr>
<tr>
<td>Hispanic/Latino</td>
<td>2</td>
<td>8.7</td>
</tr>
<tr>
<td>Caucasian</td>
<td>19</td>
<td>82.6</td>
</tr>
<tr>
<td>Prefer not to answer</td>
<td>1</td>
<td>4.3</td>
</tr>
<tr>
<td><strong>Years as Resident Director</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Less than 6 months</td>
<td>4</td>
<td>17.4</td>
</tr>
<tr>
<td>7 months to 1 year</td>
<td>5</td>
<td>21.7</td>
</tr>
<tr>
<td>1 years to 2 years</td>
<td>6</td>
<td>26.1</td>
</tr>
<tr>
<td>2 years to 3 years</td>
<td>1</td>
<td>4.3</td>
</tr>
<tr>
<td>3 years to 4 years</td>
<td>3</td>
<td>13.0</td>
</tr>
<tr>
<td>4 years to 5 years</td>
<td>3</td>
<td>13.0</td>
</tr>
<tr>
<td>More than 5 years</td>
<td>1</td>
<td>4.3</td>
</tr>
</tbody>
</table>
The majority of participants (82.6%) self-identified as Caucasian (n = 19). The majority (65.2%, n = 15) of respondents were 25 to 34 years of age. Of the sample, 17.3% (n = 4) were actively enrolled in a post-baccalaureate program at the time of the survey, and 26.1% (n = 6) of the participants had a master’s degree or higher. The mean years of experience as a Resident Director was 3.03 years. The majority of the survey respondents (47.8%) had been at one institution as Resident Directors; 43.5% had been employed as Resident Directors at two institutions. Furthermore, 90.5% (n = 19) of the respondents indicated an interest in remaining in higher education as a career choice.

Regarding the five Resident Directors from the survey sample who additionally participated in the interviews, four of the participants identified as female and one as male. All of the interview participants were employed at Catholic colleges and universities that were founded by named religious orders. Three of the participants had master's degrees in higher education; two were pursuing master’s degrees in fields other than higher education. Three participants expressed their intentions to remain in higher education as a profession.

In describing their roles as first responders, interview participants spoke in detail about their roles in the incident response protocol on their campuses. All interview participants said their roles on campus incidents included being on call, referred to as “on-duty,” for the campus after normal business hours. All interview participants indicated that their primary role was to serve as a support agent for Resident Assistants, the student staff on campus who work within the residence halls. All of the interviewed respondents specifically identified responding to drug and alcohol violations as components of their on-call responsibilities. One participant described his/her on duty responsibilities, commenting,
We respond to anything that is student health related, medical or alcohol transport, sexual assault response for the first level of call after the RAs and then we go from there, physical assault. Really any student issue we’re called to respond. (Participant 3)

In addition to describing the types of incidents that the Resident Directors responded to, all of the interviewed Resident Directors indicated that there was a supervising administrator on call should they require additional assistance when responding to these incidents.

As part of their descriptions of their roles on campus as first responders, the Resident Directors described their specific roles on campus following the death of a student. Of the 21 Resident Directors who responded to the survey question regarding student death on campus, 52.4% \((n = 11)\) of the survey respondents had experienced one or more student deaths (illness, homicide, and suicide, accidental) during their employment as a Resident Director (see Table 5). Of the surveyed Resident Directors, 47.6% \((n = 10)\) had not experienced a student death on campus. Of the respondents who had experienced one or more student death, 63.6% \((n = 7)\) were at a Catholic college at the time of the death.

Table 5

*Frequency of Student Death*

<table>
<thead>
<tr>
<th>Number of Resident Directors</th>
<th>Number of student deaths</th>
</tr>
</thead>
<tbody>
<tr>
<td>10</td>
<td>0</td>
</tr>
<tr>
<td>8</td>
<td>1</td>
</tr>
<tr>
<td>0</td>
<td>2</td>
</tr>
<tr>
<td>1</td>
<td>3</td>
</tr>
<tr>
<td>2</td>
<td>4 +</td>
</tr>
<tr>
<td>2</td>
<td>No response</td>
</tr>
</tbody>
</table>
The survey respondents indicated that not all of the deaths occurred while participants were employed at their current institution. All of the interview participants (n = 5) were employed as Resident Directors at a Catholic college or university at the time of the student crisis. Survey data indicated that Resident Directors were exposed to student death within their job function. Of those interviewed, four had experienced a student death; one participant in the interview group had not experienced a student death as Resident Director, but was the first responder to a suicide attempt.

Specific to their role in a student death, the description of their role in crisis varied based on the relationship to the student and the type of death. The four Resident Directors involved in the response to a student death described working with the Resident Assistant staff upon the announcement of the death. For two of the Resident Directors, the deceased lived in their halls. Response in these situations included targeted outreach to the Resident Assistants, roommates, and student peers who knew the deceased.

One participant described in detail the experience of responding to a student death on campus in which the participant was the primary responder to the scene:

I get upstairs. My Director meets me at the hallway and says this is what you are walking into. . . . And I’m up there with the Director, [redacted] Police, [redacted] we’re waiting on an ME and the DA. And two kids who found [redacted] are now at [redacted] giving their statements but the other three that had walked in later are still in the room. . . . And my job is to keep them in there. So they’re doing that. My grad comes to join me, we do the best that we can to kind of distract those students. (Participant 2)

For this Resident Director, the involvement in the response began with the death notification and continued with the support of the residential community directly impacted by the
loss of the student. This Resident Director assumed a primary role as a first responder in the campus response.

Conversely, in another incident involving an on-campus student death, a participant explained that the response role was focused on working with the Resident Assistants on campus. This staff member described,

I called all my RAs, I text them, knock on doors, and try to get them, to notify them. Most of them are sleeping as it was 7 a.m. on a Sunday morning, so I finally got in touch with them and I met with them and we shared what happened with them. And some of them knew the student so they were more upset than others. (Participant 1)

This Resident Director’s role, in contrast to Participant 2, was peripheral as the student was not a resident of the residence hall in which the Resident Director worked.

Similarly, in another incident involving a student death, the Resident Director explained that as the student was not a resident in his/her building, he/she was merely an active observer in the process. Stating,

For me, since it wasn’t in my building . . . just that hall director in that building was working with the dean of students, to support to students who are very close with the young man and anybody else on campus that was greatly affected by his passing.

(Participant 3)

Both Participants 1 and 3 described experiences in which they assumed roles in which they were supporting the primarily impacted students and staff; they did not identify themselves as one of those primary first responders. Conversely, other participants illustrated experiences in which they were principally involved. As previously described, Participant 2 was immersed in the investigation, response, and support processes. Equally, another Resident Director was
responsible for notifying residents, as well as assisting with transportation services to the funeral. Unlike the other interviewed Resident Directors, this specific situation involved a student death that occurred off campus.

One way in which the interviewed Resident Directors described their role in crisis was to examine the crisis and incident response training they received. Training for crises and incidents varied among campus; all participants described a training program in the summer months during which members of the student life team reviewed policies and protocols relative to incident response. All interview respondents expressed that they felt adequately prepared to do their assigned job, especially in regards to the administrative components. All of the interviewed participants had gone through a comprehensive summer training the summer prior to the student incident on campus. All of the interviewed Resident Directors were hired in the late spring and summer months prior to the start of the fall semester.

Responding to a student death was not uniformly covered in staff training and all interview participants indicated that training for these specific incidents was challenging because of the unique nature of each situation. One participant reflected on this point, stating,

We respond to each of those cases individually and the others; of course it’s not a set of protocol and it’s sort of a reaction when it does happen you know how to respond to community when that happens. So, no there’s not really any set if A then B might have caused that. (Participant 3)

When further examining the role of training for these incidents, another interviewed participant noted that training covered the administrative logistics of the Resident Director role. Similar to Participant 3, preparation for a student death was not covered in the incident training; this was attributed to the unpredictability of the position. The Resident Director stated,
So in terms of like administrative, organizationally, how to run my staff. Duty training like you can kind of train for duty but you can never really be one hundred percent prepared for any situation because you just don’t know what's going to happen. Any given night. So in terms of that feel like that's kind of learn as you go. (Participant 4)

In the Resident Director’s assessment, the variable nature of the position impacted the ability to train for all potential incidents which they may encounter.

As the Resident Directors described their experiences on campus as first responders, they explained their experience with burnout and its impacts on their future employment plans. As previously noted, 19 (90.5%, n = 21) of the survey respondents indicated that they intended to continue their professional career in higher education. Of those (n = 9) who provided additional information, eight indicated specific interest in remaining in student affairs in some capacity, with aspirations of working towards a Dean of Students role occurring in three of the responses.

Within the interviews, all of the subjects indicated experience with burnout and compassion fatigue. All articulated their experience with compassion fatigue and burnout in terms of the pace of their work, level of care for their students, and the impact of living on campus. Two Resident Directors identified their connection to their students as a source of fatigue. Participant 2 indicated, “I do care for every single one in that building even if I don’t know them and there is the sense of responsibility and like, they’re my world.” The other Resident Director expressed a desire to help the students grow,

I think for me, personally is because I care so much and a lot of this student I see immense potential that they are not necessarily reaching and so, I kind of want to be able to provide an opportunity for them to realize that they can grow, that they have the ability to grow and so it's difficult sometimes when you see somebody who is, you are trying to
work with them and they are not doing what you think would be the best for them. And that's kind of could be heart breaking a little bit. I guess it's like when you care too much, is when you get the burn out really quickly. (Participant 4)

These two Resident Directors illustrated the impact of the relationship with students on their campus. Furthermore, they noted in their interviews their perceived obligations to supporting the holistic development of the students on their campuses.

In addition to working closely with the students, the pace of the work was further identified as a specific source of burnout. Resident Directors used terms such as “constantly working,” “living on campus,” “always here,” and “being on duty” as specific contributors to that fatigue. The fourth interviewed Resident Director further expanded on the topic of compassion fatigue and burnout, stating,

Those points where I get burned out and then I don't realize it and I keep getting burned out, and this semester I've been really focused on scheduling time for me and making sure that I'm not putting myself after the job. (Participant 4)

Participant 4 emphasized the challenge of maintaining work-life balance, and acknowledged that work responsibilities were often priority over personal interests. In this regard challenges of work-life balance were articulated by all the interview participants, with one remarking,

It’s a tough position and it’s really one of those positions that if you’re bored, you’re not doing it right. . . . It’s a very dynamic position. At the same time, you’re never dealing with the same thing twice. So I kind of like that. . . . But work-life balance is difficult to maintain. (Participant 5)

The interviewed participants each articulated in detail a high level of burnout and their need to leave this role within the next 2 years in order to improve their lifestyle. Most
specifically, the Resident Directors indicated a desire to move into a position that did not have a component of living within a residence hall.

Research Question 2

How do Resident Directors at Catholic colleges and universities identify and describe the support they need following crisis?

Finding 2

Survey and interview participants identified the support they offered and that they utilized following a student death on campus. Of the 11 survey respondents that experienced one student death during their tenure as a Resident Director, they were offered counseling (17.4%, n = 4), Critical Incident Stress Debriefing (17.4%, n = 4), pastoral counseling (13%, n = 3), and time off (17.4%, n = 4). One survey respondent indicated that no services were offered. The minority (n = 2) of interview respondents were offered time off; four used time off after the incident.

The Resident Directors who were interviewed indicated that direct outreach for support was consistently offered by supervisors and campus leadership. Four participants indicated that counseling was offered; three of these were offered this during a private conversation and one had the offer made as part of a group announcement about available services. One participant commented that while specific services were not offered, a general sense of support and outreach was presented shortly after the incident. The Resident Director commented, “Not exactly like services. It was more like, ‘We are here for you. Let us know what you need. That is what we can do for you’” (Participant 4). While one type of support was not specifically named, Participant 4 felt supported. Similarly, another Resident Director described the more specific support received from a supervisor, commenting, “The Director of Residence Life, she did a
great job handling this. She said that whatever I need, anything I want. She just asked . . . I really felt like I was really well supported throughout the entire thing” (Participant 5). For both Resident Directors, they perceived the support presented by supervisors after the crisis as beneficial.

In addition to the postcrisis supports that were offered, Resident Directors in the sample provided information regarding the support services that they utilized and their perception of the helpfulness of the support mechanisms. The survey data illustrated that 11 Resident Directors had experienced one student death on campus. Of the 11 Resident Directors, 1 (9.09%) used individual counseling, 1 (9.09%) participated in group counseling, 1 (9.09%) met with a campus minister after the first student death. Of the surveyed Resident Directors who had experienced a student death, 8 of the 11 participated in an on-campus religious service after the incident. Of the 11 Resident Directors who experienced one student death, religious gatherings were identified as the most helpful and most utilized postcrisis intervention following that specific incident. Table 6 exhibits the Resident Directors’ perceptions of the helpfulness of the support services.

**Table 6**

*Perceptions of Helpfulness of the Support Services*

<table>
<thead>
<tr>
<th>Support service</th>
<th>Not helpful</th>
<th>Somewhat helpful</th>
<th>Helpful</th>
<th>Very helpful</th>
<th>N/A- did not use</th>
</tr>
</thead>
<tbody>
<tr>
<td>Counseling Services</td>
<td>0</td>
<td>1</td>
<td>1</td>
<td>2</td>
<td>7</td>
</tr>
<tr>
<td>Critical Incident Stress Debriefing Sessions (Small Group Debriefing)</td>
<td>0</td>
<td>0</td>
<td>1</td>
<td>2</td>
<td>8</td>
</tr>
<tr>
<td>Pastoral Counseling</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>2</td>
<td>8</td>
</tr>
<tr>
<td>On Campus Religious Gatherings/Services</td>
<td>0</td>
<td>1</td>
<td>3</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>Time Off</td>
<td>0</td>
<td>2</td>
<td>0</td>
<td>1</td>
<td>8</td>
</tr>
</tbody>
</table>
One of the interviewed Resident Directors recalled the experience of having a supervisor walk him/her to the on campus counseling center; a service that continued for the months to follow. When asked if he/she would have engaged this service without that intervention, the Resident Director indicated that he/she would not have used these services without that direct intervention.

When describing the services utilized, interview participants indicated that such support was correlated to the relationship with the student and the manner of the student’s passing. For those directly involved in the response or directly aware of the student, the experience had greater impact on their need for support. One participant noted of a crisis, “I think after the incident happened, I think I was still in shock of what happened” (Participant 4). Another participant noted that following the loss of a resident student, “It was tough news to hear. . . . I was pretty emotional at the time” (Participant 5). These two Resident Directors identified the impact of the loss as connected to their familiarity of the student. Two of the participants did not know the student, but recognized that the Resident Directors who worked directly with the students were impacted. Of this observation, one Resident Director commented,

The area coordinator of the area where [student] lived, I think it hit [the staff member] more because she knew the student. But I think I was slightly removed from it just because I didn't know [the student]. I felt like if I had known [the student] it would've been different. (Participant 1)

Through these narratives, the Resident Directors uncovered the relationship with the student subtheme.
Research Question 3

How do Resident Directors at Catholic colleges and universities interpret the pastoral element of their institutional identity as part of a postcrisis support strategy?

Finding 3

The examination of the interpretation of institutional identity began with the self-identification of religious background. Resident Directors in the survey sample self-identified as Roman Catholic \( (n = 14, 70\%) \). Nine \( (31.9\%) \) survey respondents indicated regular religious service attendance, with seven of these being Catholic. All interview participants indicated that the Catholic mission was incorporated into their professional staff training. All of the interviewed participants \( (n = 5) \) were employed at institutions founded by specific Catholic orders.

Sample participants were further asked to describe their awareness of their institutional missions and identity and provide impressions of the influence of these components in their employment experience. Pertaining to Catholic higher education, the median years of experience was 3.03 (1 to 2 years). Respondent knowledge of their campuses mission, identity, pastoral staff, and religious programming varied minimally between domains when assessed on a Likert scale. As illustrated in Table 7, the majority of respondents had some familiarity with these elements of their campuses.
Table 7

*Institutional Identity Element Knowledge*

<table>
<thead>
<tr>
<th>Identity Element</th>
<th>Not Knowledgeable</th>
<th>Somewhat Knowledgeable</th>
<th>Knowledgeable</th>
<th>Very Knowledgeable</th>
<th>Mean</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mission Statement</td>
<td>0</td>
<td>4</td>
<td>13</td>
<td>5</td>
<td>3.05</td>
</tr>
<tr>
<td>Catholic Identity</td>
<td>0</td>
<td>4</td>
<td>15</td>
<td>3</td>
<td>2.95</td>
</tr>
<tr>
<td>Campus Ministry Offerings (Programs &amp; Services)</td>
<td>1</td>
<td>5</td>
<td>8</td>
<td>8</td>
<td>3.05</td>
</tr>
<tr>
<td>Campus Ministry Staff</td>
<td>1</td>
<td>5</td>
<td>8</td>
<td>8</td>
<td>3.05</td>
</tr>
</tbody>
</table>

Additionally, the majority of survey respondents \((n = 22, 77.3\%)\) indicated that the Catholic affiliation had some importance on their decision to apply to their position. Survey and interview respondents described the influence of the institution's Catholic identity on their decision to apply:

- “I purposely sought out a Catholic institution for this position. Especially one that really focused on incorporating faith into everyday work.” (Survey respondent 18)
- “I had the opportunity to work at a Catholic institution previously and valued the educational tenets. I wanted to come back to a school with the same values of Catholic education.” (Survey respondent 19)
- “I have realized that working at a Catholic institution is very important to me as I believe in the values and enjoy the space that being at a Catholic institution offers.” (Survey respondent 1)
“I was primarily looking at Catholic colleges. I really like the feeling of community that it breeds.” (Participant 5)

Among the Resident Directors who offered this commentary, there was a perceived connection to the Catholic identity of the campuses, and most specifically, to the community dynamic associated with the Catholic campus.

In this regard, for 95.5% ($n = 21$) of survey respondents, community (not-Catholic specific) was a key factor in their decision to apply to their current institution. One survey respondent noted, “I believe that community amongst faculty, staff, and students is very important. Again, I knew the Catholic affiliation would play into that but I knew there were other factors that played into the community” (Survey respondent 7). Similarly, another survey respondent reflected on the community element, “I was looking for a small campus community that was seen as ‘tight knit’ or ‘family like’ by current student and staff” (Survey respondent 18).

The survey and interview respondents defined their institutions’ Catholic identities in terms of community, learning outcomes, and religious presence. A survey respondent noted, “I was committed to pursuing employment specifically at institutions with holistic student development models based in the Catholic tradition” (Survey respondent 20). One of the interviewed Resident Directors further explained,

And I think that the community, whether or not campus ministry is a big deal or it’s not, the feeling of community is just different at a Catholic college and part of that is hard because you can never work anywhere else. And so maybe I don’t . . . maybe a million pieces have this wonderful sense but the support for the students, the support for the staff, how we talk about behavior, how we talk about crisis, it to me always has a different tone
when it comes from that mission where it comes from a Catholic identity and that to me is really important. (Participant 2)

These particular Resident Directors associated community with the Catholic identity of their institutions.

For Resident Directors in this sample, the Catholic component of their campus was translated as community. All of the interview participants were able to explain in detail their institution’s mission and identify the founding order of their institutions. All interview participants described their mission as a type of community whereas the term Catholic is interpreted as a community dynamic that influences their work. One Resident Director explained,

So we’re a private college that is run and was founded by the [redacted] order and they are very centered on learning and seeking truth and so my interpretation is that everything we do on a daily basis should and somehow relate back to and encouraging the students to learn and speak the truth. (Participant 3)

Participant 3 interpreted the Catholic mission of the institution as a core component of his/her work on campus. The work that occurred within the residence halls was connected to the overarching mission of the institution and its Catholic identity.

At the time of the described crises, all of the interviewed participants were employed at institutions founded by specific Catholic orders, all of which were male orders. All interview participants indicated that Catholic mission was incorporated into their professional staff training.

The data also examined the way in which the Resident Directors did or did not engage their institutional identity into their postcrisis response strategy. Of those who experienced a single student death, 27.3% (n = 3) were offered pastoral counseling; one respondent used these
services. Of the same respondents, 38.1% \( (n = 8) \) indicated they would be somewhat likely or very likely to meet with a member of their campus ministry staff in the event of a subsequent tragedy. One survey respondent noted, “One of the most useful experiences I had was grabbing lunch with two campus ministers shortly after the funeral” (Survey respondent 21). Religious services were found to be helpful by a majority of the respondents, with 72.7% \( (n = 8) \) participating in services following a student’s death and 63.6% \( (n = 7) \) indicating a level of helpfulness in attending those services.

The interview participants further noted that the gathering of the entire community was helpful. While three of interview participants were not specifically offered pastoral intervention with a campus ministry staff member, they all identified the value of community gatherings in the form of services, prayer meetings, and masses. Additionally, two of the interviewed Resident Directors specifically described meeting with a campus minister. Of these two, one indicated that the experience was not beneficial. The Resident Director who found benefit in this support explained, “I really sought out campus ministry because I did have a good relationship with them, and it was really helpful to kind of air some things that I was thinking and have them” (Participant 5).

Others described their campus ministers as being there to either serve students directly during the crisis or organize the faith-based gatherings.

**Research Question 4**

Is there a crisis debriefing strategy that is preferred by Resident Directors who have experienced a campus crisis?
Finding 4

Twenty-one of the 23 survey respondents indicated their support preferences in the event of a subsequent student death on campus. The majority of respondents would be unlikely or highly unlikely to utilize pastoral support \( n = 13, 61.9\% \) but would be likely to participate in counseling \( n = 15, 71.4\% \) or utilize time off \( n = 18, 85.7\% \) in some capacity. Relative to religious gatherings, 53% \( n = 11 \) indicated they were unlikely or highly unlikely to participate in services as a support mechanism; 47.6% \( n = 10 \) indicating that they would participate in services. Table 8 presents those support mechanisms that the surveyed Resident Directors indicated that they would use in the future event of a student death.

Table 8

<table>
<thead>
<tr>
<th>Support mechanism</th>
<th>Very likely</th>
<th>Likely</th>
<th>Somewhat likely</th>
<th>Unlikely</th>
<th>Highly unlikely</th>
</tr>
</thead>
<tbody>
<tr>
<td>Counseling</td>
<td>7</td>
<td>5</td>
<td>3</td>
<td>4</td>
<td>2</td>
</tr>
<tr>
<td>Critical Incident Stress Debriefing</td>
<td>3</td>
<td>4</td>
<td>6</td>
<td>6</td>
<td>2</td>
</tr>
<tr>
<td>Debriefing (Small Group Debriefing Sessions)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Pastoral Counseling</td>
<td>3</td>
<td>0</td>
<td>5</td>
<td>11</td>
<td>2</td>
</tr>
<tr>
<td>Religious Gatherings</td>
<td>7</td>
<td>1</td>
<td>2</td>
<td>10</td>
<td>1</td>
</tr>
<tr>
<td>Time Off</td>
<td>7</td>
<td>4</td>
<td>7</td>
<td>1</td>
<td>2</td>
</tr>
</tbody>
</table>

As expressed by the interview subjects, the identified preferences of support measures were based on their reflections of the previous experiences. Time off was noted by one interview participant as a key resource, commenting,

So, the only real thing I think the school should do really is offer the resources and also have the ProStaff take time off if they have to. They just always take care of yourself, so I
mean, something like that happens, it’s important for the office or the department to say that in the event you are working long hours and this is traumatic, please take time off. It won’t count against you or anything like that. That’s helpful. (Participant 1)

The ability to take time away from the campus, the site and source of the incident, was identified as a helpful support.

Additionally, interview participants indicated that student deaths were situations that cannot be actively trained for due to the uniqueness of each situation. One Resident Director stated that in the event of another incident, he/she would want supervisors to provide parallel support to the staff that was similar to the support offered to students. Another stated,

I think empowering them to know how they feel in that moment is a valid and doesn’t negate how someone else feels they’re not supposed to feel in certain way. Giving them that space and opportunity to talk about that. (Participant 2)

Participant 2 identified the importance of acknowledging the impact of the incident as important; the Resident Director wanted validation that emotions would vary between individuals and that time to explore those feelings is important.

Furthermore, a third interviewed participant indicated that it would be helpful to have the option not to be part of the campus response team. This Resident Director noted,

It was just kind of assumed that I was going to be the one who is in charge of everything. I was never really offered an out. It was never a discussion that I had. It was never anything. I mean, I wanted to be there and I knew that I was going to but, but I was never really offered. It was never a decision. It was never a choice. (Participant 5)
This particular Resident Director indicated that being directly involved, while something he/she wanted to do, was a challenge. Having the ability to remove him/herself from the situation may have been needed, but was not an option.

Among those interviewed, the preferred support interventions were described as community focused, with an emphasis on a variety of options so that the individual Resident Director could use services that aligned to the level of involvement in the student death response and to the relationship with the student.

Interview participants spoke specifically of the value of their relationship with their Resident Director peers, one noting,

I think the most important one was people to talk to the res-life staff. Since it's a small school we are very close to one another so we really depend on one another through this time to kind of talk through how we were feeling and really just be there for one another.

(Participant 1)

This participant noted that the other Resident Directors possessed an empathetic response to the incident; their recognition of the impact of the experience was valued. This involvement of fellow Resident Directors and student affairs staff in the preferred support interventions was articulated by all interview participants. Another noted, “I think for myself, being offered to talk to, I think more my supervisor. Even though they might not be equipped for that pastoral care” (Participant 3). Similarly, an interviewed Resident Director described his/her supervisor:

“[Redacted] was very clearly my person through this and was the one who is kind of checking. Like [redacted] had always kind of been a mentor for me.” (Participant 2). Like Participant 1, these two Resident Directors described their supervisors and colleagues as an appreciated source
of support, particularly when there was acknowledgment of the impact of the crisis on the Resident Director.

Whereas all the interview participants described the actual or perceived value of colleague acknowledgment, one of the interviewed participants reflected on the absence of this acknowledgment. The Resident Director commented, “I think it would have been nice to have more acknowledgement from the rest of the RD staff” (Participant 4). Although noting that there was support received from supervising practitioners, this Resident Director indicated that the event of a future incident, more support from peer Resident Directors would be desired.

Summary of Research Findings

This chapter presented the results of the data analysis used to answer the four research questions and displays the data collected for this study. The findings in this study suggest that Resident Directors, who identified themselves as first responders, did not have one specific preference of a postcrisis response support when exposed to a crisis on campus. However, the preferences that were described by the Resident Directors were associated with the familiarity of the Resident Directors with the student involved in the crisis situation. Additionally, the Resident Directors did not identify pastoral intervention involving on-campus clergy as a preferred support. The Resident Directors did identify community gatherings, peer and supervisor support, and time off as helpful support mechanisms. Furthermore, the Resident Directors in this sample described the importance of community and community gatherings as part of their employment experience at Catholic colleges and universities.

The interview data indicate that Resident Directors in the purposeful sample served as first responders on their campuses as part of their roles in campus crisis. The interviewed (n = 5) Resident Directors all had an articulated role in the response to a variety of campus incidents,
including a student death or active suicide attempt. Their roles in these types of crises varied between interview participants, depending on the level of involvement with the initial response and the familiarity with the student. The responsibilities of the Resident Directors in this sample included supporting the students, working with law enforcement, organizing memorial services, and supporting colleagues impacted by the incident.

As part of their narrative, the Resident Directors described the incident and crisis response training they had received. All of the interviewed Resident Directors had participated in a comprehensive training program on their campuses. The sample noted the challenges associated with training for a crisis involving a student death. The Resident Directors indicated that unpredictable nature of the role made training for this specific type of a crisis a challenge.

As the Resident Directors described their roles as first responders, they all also illustrated the negative impacts of compassion fatigue on their employment. The surveyed Resident Directors all had experience with compassion fatigue as a part of their role on campus. This burnout contributed to job attrition and their desire to seek positions outside of their current roles. The unpredictable nature of the role, the pace of the position, the exposure to crisis, and living on campus among students all contributed to the compassion fatigue described by the Resident Directors in the sample.

The data illustrate that the Resident Directors who experienced a student death \((n = 11)\) did not have one specific preference regarding the support that they were offered or utilized, but rather identified multiple support preferences in a postcrisis paradigm. The data illustrate that the Resident Directors in the sample identified peer support, clinical counseling, religious gatherings, and time to process individually as preferred support preferences. The interviewed Resident Directors also indicated that colleague and supervisor support and outreach following
an incident was an appreciated support. The data from the five interviews suggest that the need for and utilization of support was greater based on the familiarity of the Resident Director with the student. The use of supports was greater by those Resident Directors who were more intimately involved in the crisis response or who knew the involved student.

Furthermore, Resident Directors in this sample did not interpret pastoral crisis intervention as a core component of the crisis response strategy on campus. Specific support from on-campus clergy was not identified as a debriefing preference. The influence of Catholic mission and identity of a campus in a crisis response paradigm was associated with the community component of the institutional identity. Most specifically, religious gatherings were identified by the majority of respondents as the most valuable pastoral asset during times of crisis on the Catholic college and university campuses in the sample.

Outside of a crisis situation, the majority of the sample identified their Catholic institutional mission and identity as an important factor in their employment decision. The interview participants described their institutional Catholic identity in terms of guiding principles of community, not a specific religious order. Furthermore, community was identified as a key employment consideration, irrespective of an institution’s religious affiliation. The majority of the sample expressed an appreciation for the Catholic identities of their campuses and identified the religious affiliation as an asset.

Furthermore, the data indicated that in the event exposure to a student death in the future, Resident Directors did not have one support preference. Religious gatherings and pastoral intervention were not identified as an anticipated support preference. Resident Directors in the survey and interview samples suggested the postcrisis support plans be multidimensional and
include options. Among the preferences noted by the sample were time off from work, counseling, and supervisor and peer outreach.

Chapter 5 will discuss the findings and provide implications for the conclusions as well as recommendations for further research.
The purpose of this study was to establish if, in the context of their roles and responsibilities as first responders, Resident Directors at a purposeful sample of Catholic colleges and universities identified pastoral crisis intervention as a supportive resource following a student death on campus. This study further examined whether these Resident Directors had expectations about faith-based crisis intervention resources due to their institutions’ Catholic identities.

The study sought to answer the four research questions:

1. How do Resident Directors at Catholic colleges and universities describe their roles as first responders during a campus crisis?
2. How do Resident Directors at Catholic colleges and universities identify and describe the support they need following crisis?
3. How do Resident Directors at Catholic colleges and universities interpret the pastoral element of their institutional identity as part of a postcrisis support strategy?
4. Is there a crisis debriefing strategy that is preferred by Resident Directors who have experienced a campus crisis?

Overall Summary

This phenomenological study sought to identify the self-described roles of the Resident Directors during crisis. Four research questions were addressed. A current literature review provided the focus for the research design and the methodology used in the study. All 23 survey respondents and the 5 interview participants from within the survey sample were Resident
Directors at Catholic colleges and universities at the time of the study and served as the research sample.

**Research Question 1.** Research Question 1 identified how Resident Directors described their roles in crisis. The results indicated that of those Resident Directors who were interviewed, all had articulated roles in crisis response as a component of their job function as first responders on campus. The Resident Directors described the various types of incidents to which they responded and their roles in these incidents. As a component of this role, the Resident Directors described the crisis response trainings that they received.

In the specific case of a student death, the interviewed Resident Directors explained their roles in this type of crisis and what training they had received in preparation for navigating these types of incidents. Of the total sample, 11 of the 23 surveyed Resident Directors had experienced at least one student death on campus.

In addition to responses to the question, other themes emerged from the data. In examining the first research question, the Resident Directors in the interviewed sample described experiencing compassion fatigue on a chronic basis. In describing their roles on campus as first responders, the interviewed Resident Directors further described experiences with compassion fatigue during their employment. Their experience with compassion fatigue was related to their duties working in crisis situations.

**Research Question 2.** Research Question 2 examined how the Resident Directors identified and described the support they needed following a crisis. Eleven surveyed Resident Directors identified the supports that they were offered as well as those that were utilized following a student death on campus. Formal supports identified were counseling, time off, and
religious gatherings. Religious gatherings were identified as the most helpful and most utilized postcrisis intervention following a specific incident.

Additionally, the interviewed Resident Directors indicated that the level of support that was needed was in relation to their familiarity with the student. This emerged theme was drawn from the interview data. Resident Directors who were directly involved in the student death incident indicated a greater need for support from supervisors. This involvement included being the primary responder to the incident and organizing the campus response. Familiarity with the student was described in terms of involvement in the incident or knowledge of the student based on residence hall placement. The Resident Directors who were not directly involved in the incident response, or who did not know the student, did not express the need for support following the crisis. The sample also indicated that direct outreach from colleagues and supervisors was a valued support.

**Research Question 3.** Research Question 3 assessed how the Resident Directors interpreted the pastoral element of their institutional identity as part of a postcrisis support strategy. The participants’ connection to the Catholic identity of the institutions was not translated in terms of clergy support in a postcrisis response paradigm. However, religious gatherings were identified as helpful. Religious services were found to be helpful by a majority of the survey and interview respondents. Additionally, the majority of survey respondents indicated that their institutions Catholic affiliation influenced their decision to apply to their role as a Resident Director. The surveyed and interviewed Resident Directors articulated a positive connection to their institutions’ Catholic identity and highlighted community as a central component of this identity.
**Research Question 4.** Research Question 4 explored the preferred debriefing strategies of Resident Directors in the sample. The data indicate that the sample of Resident Directors did not have one support preference. The majority of the Resident Directors in the overall sample identified time-off and counseling as postcrisis intervention preferences. Furthermore, the interviewed sample participants highlighted their preference towards individualized support that was supervisor and colleague driven.

**Conclusions**

This study provides findings about the experience of 23 surveyed Resident Directors and 5 interviewed Resident Directors from within the survey sample who worked at a select sample of Catholic colleges and universities in New England. This study evaluated the postcrisis experience from the lens of a Resident Director as a means to comprehensively explore their employment experience as first responders on a Catholic college or university campus in New England.

The literature review found that Resident Directors served a multifaceted role on college campuses. As part of their role, Resident Directors served as first responders on college campuses. First responders in a crisis response paradigm are vulnerable to compassion fatigue and work-related stress (Figley, 1995; Slocum-Gori et al., 2011). Given the susceptibility to work-related stress and their prominent role on a college campus, an exploration of the Resident Directors’ experiences was warranted. Additionally, college campuses and universities face ongoing recruitment and retention concerns relative to Resident Directors and the demands related to their work responsibilities (Belch & Mueller, 2003; Ellett et al., 2008).

Additionally, this study examined whether Resident Directors who had experienced a crisis had expectations and preferences regarding support and if these preferences included
Mitchell’s (1983) model of Critical Incident Stress Debriefing. Furthermore, this study explored whether these preferences were connected to the Catholic identities of the sample institutions based upon Pargament’s (1997) theory of religious coping. This study provided findings that indicated that Resident Directors who served as first responders in a crisis response paradigm experienced compassion fatigue. Resident Directors had preferences regarding support needs following a campus crisis. The Resident Directors in this sample identified the Catholic identity of their campuses as an asset in a crisis response paradigm. The following conclusions are relevant to the sample of Resident Directors in this study.

**Conclusion 1.** Resident Directors in this sample of Catholic colleges and universities confirmed their roles as first responders and that they experienced the compassion fatigue associated with that role.

This research study defined first responders as individuals who embodied a personal and professional aptitude for assisting in crisis situations, and whose role or position required response to critical incidents. Klee and Renner (2013) further described first responders as having calmness, empathy, sociability, and dedication. Struempf (2004) identified Resident Directors as having a key role in crisis response plans. Using this definition, and as supported by the literature, the data in the current study affirmed that the Resident Directors in this sample served as first responders in a crisis response paradigm.

All interview participants had defined roles involving incident response and campus presence. Harper and William (2006) defined a campus crisis as in incident that “disrupts the normal operations of the institution or its educational mission and threatens the well-being of personnel, property, financial resources, and/or reputation of the institution” (p. 5). In addition to the description offered by the literature, the events described by the Resident Directors in this
sample met the definition of crisis used for this study—an unanticipated event in which individual coping mechanisms may be deployed in order to prevail over the perceived events. As well as responding to a student death, the incident of focus in this research study, the interviewed Resident Directors all described having an on-call and incident response function, which included responding to incidents such as intoxication, drug use, sexual assault, psychological crisis, campus lockdowns, and medical emergencies (individual and campus-wide.) All of the interviewed participants described having articulated roles in the response to a student death or active suicide attempt. All of the deaths or suicide attempts described by participants required a campus-wide response, in conjunction with a specific residence life response.

Griffon, Donaldson, and Simmons (2007) noted, “Among the needs to be addressed by administrators is the emotional fatigue that accumulates in members of campus personnel directly involved in planned interventions” (p. 106). The scope of involvement in the response protocol was relative to the relationship that the Resident Director had with the student. Those who did not know the student did not have an extensive role in the postcrisis response; for two Resident Directors, however, the deceased students had lived in their residence halls. Therefore, they had a larger role in the response by proxy of this relationship. This more complex response included notifying students of the death, organizing memorials, working with law enforcement, and conducting hall meetings. As suggested by Stone et al. (2004), this proximity to the incident would impact the experienced level of grief. Those Resident Directors who assumed a greater role in the crisis response utilized additional resources compared to their secondarily involved peers.

Research suggests that a coordinated crisis response plan is necessary on college campuses (Callahan & Fox, 2008; Streufert, 2004). All interview participants in this sample
identified receiving training specific to incident and crisis response. However, while the participants each described comprehensive staff training, they all noted that student death was not an event for which they could be completely trained. As stated by one such Resident Director, “It’s just very scary. Like this is the reality. This is the thing that like everybody fears and sometimes it happens. So in that, I don’t think you will ever kind of be prepared for that.” Similarly, another noted, “We respond to each of those cases individually . . . it’s not a set protocol and it’s sort of a reaction when it does happen.” Preparing for the death of a student was not part of an overall training plan for the Resident Directors in this study.

In addition to the initial impacts of crisis response, first responders are exposed to secondary trauma known as *compassion fatigue*. Compassion fatigue refers to the emotional cost of supporting others (Figley, 1995; Slocum-Gori et al., 2011). In their capacity as first responders, this population of Resident Directors was susceptible to compassion fatigue, as expected based on the literature (Ellett et al., 2008). Of those Resident Directors who were interviewed, all articulated experience with burnout; this burnout was a factor in their decision to leave the position or change college campuses.

Wright and Cropanzo (2000) found that well-being was a key indicator in an employee’s decision to remain in a certain role. The interviewed Resident Directors in this study all described environments where well-being was sacrificed at the expense of their duties, which they did so willingly. Resident Directors in the sample also discussed the ability to take time-off from work and duty responsibilities as a mechanism to alleviate stress. Jablonski, McClellan, and Zdziarski (2008) recommended that institutions should give attention to the needs of student affairs staff, such as Resident Directors, who are exposed to campus trauma. The data from this
study suggested that such attention may be warranted on an ongoing basis, in addition to immediately after a crisis.

The profile of the sample reinforced the existing literature that Resident Directors are an entry-level role within Student Affairs and have a multifaceted and difficult role on campus (Ellett et al., 2008; St. Onge et al., 2008). Understanding their roles as first responders in a crisis situation, Resident Directors are susceptible to attrition; not only following a crisis, but during their regular work. As noted by Belch and Mueller (2003), quality of life is a contributing factor to Resident Director recruitment and retention. The struggle to achieve work-life balance was a recurring theme among this isolated research sample, as well.

Resident Directors in this purposeful sample identified themselves as first responders in the crisis response paradigm, and described the training that they received for these incidents. Student death was not a crisis that was uniformly covered in training. Within their role as first responders, the Resident Directors in this sample described experiences with compassion fatigue and burnout. The exposure to varying crises on a chronic basis impacted their work negatively and impacted future employment considerations.

**Conclusion 2.** Resident Directors in this purposeful sample wanted personalized support that accounted for the familiarity with the student and that was offered by their supervisors and colleagues.

As noted previously, compassion fatigue is a concern among this staff population and this study supports the development of debriefing protocols that support staff. Streufert (2004) recommended that colleges integrate debriefing strategies following a student death that allow the staff to “share their reactions because responding may have caused compassion fatigue” (p. 164). Belch et al. (2009) similarly noted that Resident Directors, irrespective of long-term
career plans within higher education, were more likely to be successful if their supervisors
created a network of support that addressed their job functions.

In the present study, the interviewed Resident Directors expressed the importance of their
departmental support network. Regardless of the level of involvement or knowledge of the
student, all described their student affairs colleagues as central sources of support. Interview
participants lauded supervisors and fellow student affairs staff who were supportive; they equally
discredited those who did not offer support or comfort. One interview participant noted that a
lack of recognition from her peers was difficult and isolating. This same participant was leaving
the higher education field. Conversely, another participant, who is remaining in higher education,
specifically emphasized the value of directed outreach from his supervisor and planned to remain
in the role until degree completion. The presence or lack of direct outreach for these non-higher
education practitioners directly impacted employment satisfaction following a crisis.

Kalia (2002) and Belch et al. (2009) suggested that staff members who were supported in
the workplace were more likely to stay employed following a crisis; in this respect, the
perspectives offered by the Resident Directors in this study aligned with these existing findings.
The Resident Directors who were interviewed all described support needs that were specific to
the level of involvement that they had with the incident itself. As reinforced by Stone et al.
(2004), those who were directly involved in the crisis response protocol wanted a greater level of
support from supervisors than those on the periphery. Similarly, those who knew the student
articulated needing a greater level of support offered and used. Staff on the periphery of the
response needed less support, but recognized that their peers needed more support.

The interviewed sample similarly noted that having the ability to converse with peers,
family, and supervisors was helpful. Again, the opportunity to allow staff to seek out these
opportunities to converse was important to allowing helpful processing as a means of minimizing compassion fatigue and stabilizing the staff. Providing options as well as ease of access to these resources was a consideration. As suggested by Streufert (2004), colleges must evaluate the specific resources on their campuses, including colleagues, when making these postcrisis response plans.

The Resident Directors in this sample articulated a need for support that was associated with the degree of familiarity with the student involved. Support systems were utilized based on the level of involvement in the response and the level of connection with the student. The Resident Directors noted that direct outreach from a supervisor or colleague was valued and perceived as important in their postcrisis debriefing and their receptivity to use a support mechanism.

**Conclusion 3.** Resident Directors in this purposeful sample appeared to have a strong interpretation of the community component of their Catholic institutions as part of the postcrisis support strategy.

As suggested by Pargament (1997), religion is a personal construct; while it may orient an individual’s actions, it is unique to each person. Religion, in this context, was difficult to examine, as each individual interviewed expressed a unique interpretation with their faith. Additionally, not all of the research participants were Roman Catholic.

Notwithstanding the Resident Directors’ challenge in identifying their individual relationship with religion, the sample Resident Directors were able to articulate the value of the Catholic identities of their institutions. Those who were interviewed identified their campuses’ Catholic identities in terms of community. Among the survey and the interview population, community was identified as a central element to their employment experience. As highlighted in
the research, while Catholic mission and identity was unique to each campus, it nonetheless provided a framework for the institutional operation (Abelman, 2012, Morphew & Hartley, 2006). Taking from Chickering (2006), the Resident Directors expressed the value of having an institutional spiritual identity as part of their employment experience, and as part of the student experience. In this study, participants identified community as a central tenant of this Catholic identity. Contrary to Abelman’s (2012) research, all those interviewed in this sample could readily identify and describe their institutions’ mission statements. Furthermore, within the Association of Student Affairs at Catholic Colleges and Universities’ (ASACCU) Principles of Practice, the first principle guides practitioners to develop vibrant campus communities in the spirit of the Catholic tradition (Estanek & James, 2007, 2010). As student affairs practitioners, Resident Directors in this sample not only had a strong understanding of their institutional identity, but a reverence for it and its relation to community building.

Furthermore, the majority of survey respondents indicated that community was a factor in their employment decision, more so than campus identity. Resident Directors identified the campus community as a valuable asset in times of crisis and calm. Hawdon and Ryan (2011) noted in their research that community-based response was beneficial for those impacted by campus trauma; the findings in this study reaffirmed the findings in Hawdon and Ryan’s larger exploration.

Despite such a connection to religious gatherings and the community component of their Catholic identities, the research sample did not identify campus clergy as a resource for professional staff following a crisis. Fair (2010) and Stewart (2012) identified clergy as value-added element to crisis response. While each of the interviewed participants could readily identify the founding orders of their campuses and the value of a campus ministry presence on
campus, only one of the interviewed Resident Directors in this study highlighted clergy as an element of their postcrisis preference. The Resident Director indicated that the pastoral counseling that followed a crisis was very helpful. In this regard, the response sample saw the community element of their Catholic identity as more helpful than an individual meeting; yet those who elected to use the individual approach found it beneficial. Furthermore, research indicates that religious gatherings are positive influences following a tragedy (Ano & Vasconcelles, 2005; McCabe et al., 2007; Pargament, 1997). The data from this study appear to support this existing research. This community verses individual distinction aligns again with Pargament’s (1997) concept that religious coping is a personalized construct.

Within this study, the role of Catholic mission and identity in a postcrisis response was not identified in terms of pastoral intervention, but in regards to community gatherings. The sample of Resident Directors had a strong connection to the community on their campus, irrespective of personal religious identity. The Resident Directors saw value in a community response that was represented the overarching community values, verses a clergy-centered pastoral intervention strategy.

**Conclusion 4.** Resident Directors in this purposeful sample had several preferences about debriefing supports.

A guiding theory to this study was that Mitchell’s (1983) CISD model was the industry standard for crisis debriefing. Critical Incident Stress Debriefing, the traditional debriefing protocol developed by Mitchell (1983), was not named by any of the interviewed participants as a familiar resource. Some research has indicated that formal CISD was not an effective support mechanism (Gray & Litz, 2005; Raphael & Meldrum, 1995; Rose & Bisson, 1998; Rose, Bisson, & Wessely, 2003; Seely, 2007; Wessely et al., 2003). The data from this study did not indicate
that CISD was universally applied or used among the sample and its efficacy could not be established. However, while facilitated CISD was not named as a preferential support mechanism, interviewed respondents did articulate the value of peer group debriefing following the crisis, such as the group debriefing suggested by Pender and Prichard (2007).

This study examined whether integrating a campus’ religious identity aids in the debriefing process on Catholic campuses. As noted by Ano and Vasconcelles (2005) and Bjorck and Thurman (2007), religious coping is an individual construct. Specific to religious coping, Pargament (1997) noted that the use of faith as a coping strategy is based on the individual’s interpretation of faith and faith as a support. As noted in Chapter 4, survey and interview participants described the value in having choice in their options. As recommended by Struefert (2004), response plan options should take into consideration available resources, while also offering flexibility. These resources may or may not include religious debriefing at the Resident Director’s discretion.

Additionally, the need for support was again correlated with the relationship to the crisis. For those who organize crisis response plans, awareness as to who is involved in the response, who is connected to the student(s), and how they are engaged in the response is an important consideration. Silberman et al. (2007) highlighted the importance of a comprehensive response to first responders; failing to support those staff contributes to work-related absenteeism and performance issues. Similarly, they noted that the response should be specific to the employee. Furthermore, as expressed by all interview participants in this research study, being asked what would be helpful was identified as a valuable resource. Specific and supportive outreach allowed the staff to navigate the experience on his/her terms. Included within training programs should be
a discussion of these events, and what measures the institution will take to support a staff following such a situation.

As addressed previously, Resident Directors in this sample indicated that having a variety of options to navigate a crisis was preferred. Of specific note is that those interviewed all affirmed that incidents of student death are unique and therefore support following these incidents must be equally as fluid. This support was needed from supervisors, who could supply an array of support mechanisms immediately after the incident and in the days following. In addition to personal outreach from supervisors, the interviewed participants noted that time away from campus was helpful; however, the time off was not universally available. Two of interviewed Resident Directors indicated they used existing time off or comp time following the student death. Two were actively offered a day off without regard for vacation time availability. The fifth participant was not offered time off, nor was it desired. Evidence in this study supported that time-off was a utilized and appreciated support following exposure to a student death on campus.

The study sample did not have on particular preference for debriefing preferences. Across the sample, however, time-off from campus was an identified preference. Additionally, preferences for supports were connected to the familiarity with the student and the crisis. The sample indicated that supports should be varied and consistently offered by colleagues.

**Research Recommendations**

Recommendations for future study have been developed based on the findings and conclusions of this study:

1. The study should be replicated using a larger sample to examine the implications of Resident Directors as first responders who experience compassion fatigue on college
campuses. Since this study was a limited sample, further study with a larger population may yield additional information to validate the significance of this observation.

2. This study should be expanded using a larger sample to examine the impact of supervisor support among Resident Directors. Within the research, the theme of supervisor support emerged as a strong preference among Resident Directors. Since this study was a limited sample, additional study about the impact of supervisor support following a campus crisis is recommended.

3. This study should be expanded using a larger sample to examine the specific influence of Catholic community gatherings on Resident Director staff. Findings in this study demonstrated that the community component of the sample campuses was an identified asset. Further study outside of the New England region may validate the significance of this finding.

4. This study should be expanded using a larger sample to examine debriefing preferences among Resident Directors who have experienced a campus crisis. Whereas this study was a limited sample within New England, further study with a larger population may yield additional information about these debriefing strategies.

This study has identified the roles and responsibilities of Resident Directors who are first responders at a purposeful sample of Catholic colleges and universities in New England. The study findings indicated that the Resident Directors in this sample were exposed to compassion fatigue and had multiple preferences about the support they needed following exposure to a crisis. The impacts of these crises and the subsequent compassion fatigue negatively influenced their employment experience.
As student affairs administrators evaluate their Resident Director retention and recruitment challenges, as a result of this study there exist opportunities to leverage training and response strategies to support Resident Directors. The Resident Directors in this study also illustrated the positive impact of the campus’ Catholic identities and the importance of their campus communities in their employment choice. Subsequently, student affairs administrators at Catholic colleges and universities have further opportunities to inculcate the identified value of community in their postcrisis response strategies. As described in this study through their own words, and as affirmed by literature, Resident Directors play a vital role in the operations of higher education and in student development on college campuses. The critical role of Resident Directors is worthy of comprehensive and continued exploration.

Resident Directors at the sample colleges and universities campuses experienced situations as first responders that profoundly impacted their work. Their exposure to crisis on their campuses influenced their decisions to examine roles outside of residence life. These Resident Directors, dedicated to their roles and responsibilities, often served students at the expense of caring for themselves. They navigated crises with critical support from their colleagues and supervisors, who are positioned to lead with compassion in the spirit of their Catholic institutions.
REFERENCES


APPENDIX A

PARTICIPANTS

1. Albertus Magnus College, New Haven, CT
2. Anna Maria College, Paxton MA
3. Assumption College, Worcester, MA
4. College of the Holy Cross, Worcester, MA
5. College of Our Lady of the Elms, Chicopee, MA
6. Emmanuel College, Boston, MA
7. Fairfield University, Fairfield, CT
8. Merrimack College, North Andover, MA
9. Providence College, Providence, RI
10. Regis College, Weston, MA
11. Rivier College, Nashua, NH
12. Salve Regina University, Newport, RI
13. St. Anselm College, Manchester, NH
14. University of Saint Joseph, West Hartford, CT
15. St. Joseph's College of Maine, Standish, ME
16. St. Michael's College, Colchester (Burlington), VT
17. Stonehill College, North Easton, MA
DEMOGRAPHIC DATA

2. What is your gender?
   - Female
   - Male

3. What is your age?
   - 18 to 24
   - 25 to 34
   - 35 to 44
   - 45 to 54
   - 55 to 64
   - 65 to 74
   - 75 or older

4. What is your ethnicity? (Please select all that apply.)
   - American Indian or Alaskan Native
   - Asian or Pacific Islander
   - Black or African American
   - Hispanic or Latino
   - White / Caucasian
   - Prefer not to answer
   - Other (please specify)

   [Box for Other (please specify)]
5. What is your religious affiliation?

- Baptist
- Buddhist
- Greek Orthodox
- Hindu
- Jewish
- Mormon
- Protestant
- Roman Catholic
- Seventh Day Adventist
- Non-denominational Christian
- No religious affiliation

Other (please specify)

6. Do you regularly attend religious services?

- Yes
- No

7. What is the highest level of education you have completed?

8. Are you currently enrolled as a student?

- Yes, full time in graduate school
- Yes, part time in graduate school
- Yes, full time at a four year undergraduate college/university
- Yes, part time at a four year undergraduate college/university
- Yes, full time at a two year undergraduate college/university
- Yes, part time at a two year undergraduate college/university
- Yes, at a high school or equivalent
- No, I am not currently enrolled as a student
The purpose of this study is to establish if, in the context of their roles and responsibilities as first responders, Resident Directors at a purposeful sample of Catholic colleges and universities identify pastoral crisis intervention as a supportive resource following a student death on campus. This study further examines if these Resident Directors have expectations about faith-based crisis intervention resources due to their institutions' Catholic identities.

Participation in this study is voluntary.

Your name (if provided), institution's name, and all identifying information will be removed, in accordance with Federal Laws surrounding student records. No individually identifiable information will be required as part of your participation in this process.

Your decision to participate will have no impact on your current or future relations with the University of New England or your employer.

You may skip or refuse to answer any question for any reason.

If you choose not to participate there is no penalty to you and you will not lose any benefits that you are otherwise entitled to receive.

You are free to withdraw from this research study at any time, for any reason.

If you choose to withdraw from the research there will be no penalty to you and you will not lose any benefits that you are otherwise entitled to receive.

**1. I understand the above description of this research and the risks and benefits associated with my participation as a research subject. I agree to take part in the research and do so voluntarily.**

- [ ] YES- I consent to participate in this survey
- [ ] NO- I do not wish to participate.
9. What degree are you pursuing?

- [ ] Associates
- [ ] Bachelors
- [ ] Some Masters
- [ ] Masters
- [ ] Some Post Graduate
- [ ] CAGS
- [ ] Doctorate (PhD, EdD, JD, etc)
- [ ] Not Applicable

Please indicate the field of study
**EMPLOYMENT INFORMATION**

10. Current institution:
- Albertus Magnus
- Anna Maria College
- Assumption College
- College of the Holy Cross
- College of our Lady of the Elms
- Emmanuel College
- Fairfield University
- Merrimack College
- Providence College
- Regis College
- Rivier College
- Salve Regina University
- St. Anselm College
- University of St. Joseph
- St. Joseph College of Maine
- St. Michael's College
- Stonehill College

11. Years of experience as a Resident Director.

A Resident Director is a full-time, live-on professional staff member within a student affairs division who directly supervises a residence hall, the para-professional staff within the hall, and the residential students within the hall.

- Less than 6 months
- 7 months to 1 year
- 1 year to 2 years
- 2 years to 3 years
- 3 years to 4 years
- 4 years to 5 years
- 5+ years
12. Number of institutions in which you have been a Resident Director:
- 1
- 2
- 3
- 4
- 5
- More than 5

13. Total years of professional experience in Catholic Higher Education:
- Less than 6 months
- 7 months to 1 year
- 1 year to 2 years
- 2 years to 3 years
- 3 years to 4 years
- 4 years to 5 years
- 5+ years
### 14. How knowledgeable are you with your current institution’s:

<table>
<thead>
<tr>
<th></th>
<th>Not Knowledgeable</th>
<th>Somewhat Knowledgeable</th>
<th>Knowledgeable</th>
<th>Very Knowledgeable</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mission Statement</td>
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<tr>
<td>Catholic Identity</td>
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<tr>
<td>Campus Ministry Offerings</td>
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<tr>
<td>(Programs &amp; Services)</td>
<td></td>
<td></td>
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<tr>
<td>Campus Ministry Staff</td>
<td></td>
<td></td>
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<td></td>
</tr>
</tbody>
</table>

### 15. When applying to work at your current institution, how important was the Catholic affiliation in your decision to apply:

- Unimportant
- Somewhat Important
- Important
- Very Important

Please describe

### 16. When applying to work at your current institution, how important was the campus community in your decision to apply:

- Unimportant
- Somewhat Important
- Important
- Very Important

Please describe

### 17. In the event of a crisis, which is a surprise event which may disrupt function, how likely are you to seek out the following services to help cope:

<table>
<thead>
<tr>
<th></th>
<th>Not likely</th>
<th>Somewhat likely</th>
<th>Likely</th>
<th>Very likely</th>
</tr>
</thead>
<tbody>
<tr>
<td>Family</td>
<td></td>
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<td></td>
<td></td>
</tr>
<tr>
<td>Friends</td>
<td></td>
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<tr>
<td>On campus counselor</td>
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<tr>
<td>Off campus counselor</td>
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<tr>
<td>Supervisor</td>
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<tr>
<td>On campus ministry staff/clergy</td>
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<tr>
<td>Off campus clergy</td>
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</table>
STUDENT DEATH ON CAMPUS

18. How many student deaths (illness, homicide, suicide, accidental) have you experienced while working as a Resident Director? A student death refers to the loss of a student at the institution at which you are/were professionally employed.

- 0
- 1
- 2
- 3
- 4 or more
19. At the time of the student death, were you employed at a Catholic college or university?
   - Yes
   - No
   - Not applicable
   Additional comments:

20. Following the death of the student, were you offered (check all that apply):
   - Counseling
   - Critical Incident Stress Debriefing (Small Group Debriefing Sessions)
   - Pastoral Counseling
   - Time Off
   - No services were offered
   - Not applicable

21. Following the death of the student, did you participate in any private counseling sessions with a counselor?
   - Yes
   - No
   - Not applicable
   Please describe:

22. Following the death of the student, did you participate in any small group counseling sessions with a counselor?
   - Yes
   - No
   - Not applicable
   Please describe:
23. Following the death of the student, did you participate in any private counseling sessions with a campus minister?

- Yes
- No
- Not applicable

Please describe

24. Following the death of the student, did you participate in any on campus religious gatherings or services?

- Yes
- No
- Not applicable

Please describe

25. How helpful did you find the following in your coping following the student’s death at the institution:

<table>
<thead>
<tr>
<th>Services</th>
<th>Not helpful</th>
<th>Somewhat helpful</th>
<th>Helpful</th>
<th>Very helpful</th>
<th>N/A - did not use</th>
</tr>
</thead>
<tbody>
<tr>
<td>Counseling Services</td>
<td></td>
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<tr>
<td>Critical Incident Stress</td>
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<tr>
<td>Debriefing Sessions (Small Group Debriefing)</td>
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<tr>
<td>Pastoral Counseling</td>
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<tr>
<td>On Campus Religious Gatherings/Services</td>
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<tr>
<td>Time Off</td>
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</tbody>
</table>
26. At the time of the second student’s death, were you employed at a Catholic college or university?

- Yes
- No
- Not applicable

Additional comments:

27. Following the death of the second student, were you offered (check all that apply):

- Counseling
- Critical Incident Stress Debriefing (Small Group Debriefing Sessions)
- Pastoral Counseling
- Time Off
- No services were offered
- Not applicable

28. Following the death of the second student, did you participate in any private counseling sessions with a counselor?

- Yes
- No
- Not applicable

Please describe:

29. Following the death of the second student, did you participate in any small group counseling sessions with a counselor?

- Yes
- No
- Not applicable

Please describe:
30. Following the death of the second student, did you participate in any private counseling sessions with a campus minister?

- Yes
- No
- Not applicable

Please describe

31. Following the death of the second student, did you participate in any on campus religious gatherings or services?

- Yes
- No
- Not applicable

Please describe

32. How helpful did you find the following in your coping following the second student's death at the institution:

<table>
<thead>
<tr>
<th>Service</th>
<th>Not helpful</th>
<th>Somewhat helpful</th>
<th>Helpful</th>
<th>Very helpful</th>
<th>N/A - did not use</th>
</tr>
</thead>
<tbody>
<tr>
<td>Counseling Services</td>
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<tr>
<td>Critical Incident Stress Debriefing Sessions (Small Group Debriefing)</td>
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<tr>
<td>Pastoral Counseling</td>
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<td>On Campus Religious Gatherings/Services</td>
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<tr>
<td>Time Off</td>
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</table>
33. At the time of the third student’s death, were you employed at a Catholic college or university?
   - Yes
   - No
   - Not applicable
   
   Additional comments:

34. Following the death of the third student, were you offered (check all that apply):
   - Counseling
   - Critical Incident Stress Debriefing (Small Group Debriefing Sessions)
   - Pastoral Counseling
   - Time Off
   - No services were offered
   - Not applicable

35. Following the death of the third student, did you participate in any private counseling sessions with a counselor?
   - Yes
   - No
   - Not applicable
   
   Please describe:

36. Following the death of the second student, did you participate in any small group counseling sessions with a counselor?
   - Yes
   - No
   - Not applicable
   
   Please describe:
37. Following the death of the third student, did you participate in any private counseling sessions with a campus minister?

- Yes
- No
- Not applicable

Please describe

38. Following the death of the third student, did you participate in any on campus religious gatherings or services?

- Yes
- No
- Not applicable

Please describe

39. How helpful did you find the following in your coping following the second third student's death at the institution:

<table>
<thead>
<tr>
<th>Service</th>
<th>Not helpful</th>
<th>Somewhat helpful</th>
<th>Helpful</th>
<th>Very helpful</th>
<th>N/A- did not use</th>
</tr>
</thead>
<tbody>
<tr>
<td>Counseling Services</td>
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<tr>
<td>Critical Incident Stress</td>
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<tr>
<td>Debriefing Sessions (Small Group Debriefing)</td>
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<tr>
<td>Pastoral Counseling</td>
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<tr>
<td>On Campus Religious Gatherings/Services</td>
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<tr>
<td>Time Off</td>
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</table>
### FUTURE EMPLOYMENT

**40. Do you intend to continue your professional career in student affairs in higher education?**

- [ ] Yes
- [ ] No

**Please describe**

---

**41. When applying to work at a future institution, how important will be the Catholic affiliation in you decision to apply?**

- [ ] Unimportant
- [ ] Somewhat Important
- [ ] Important
- [ ] Very Important
- [ ] Please describe

**42. In the event you experience the loss of a student while working as a Resident Director in the future, how likely are you to utilize the following services following the student death:**

<table>
<thead>
<tr>
<th></th>
<th>Unlikely</th>
<th>Somewhat likely</th>
<th>Likely</th>
<th>Very likely</th>
<th>Highly unlikely</th>
</tr>
</thead>
<tbody>
<tr>
<td>Counseling</td>
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<tr>
<td>Critical Incident Stress</td>
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<tr>
<td>Debriefing (Small Group Debriefing Sessions)</td>
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<tr>
<td>Pastoral Counseling</td>
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<tr>
<td>Religious Gatherings</td>
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<tr>
<td>Time Off</td>
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</tbody>
</table>
THANK YOU

Thank you for taking the time to complete this survey. A key component to this research is the voluntary participation of professionals within the higher education community.

If you are interested in continuing within this study as an interviewee, please supply your email address in the field, below. The participation in any interview is confidential, and you may withdraw participation at any time. If you supply an email address, the researcher will be in touch about arranging a time to speak to ask additional follow-up qualitative and narrative questions about the Resident Director experience following a student death on campus.

43. I am interested in participating in an additional interview regarding this study. My email address is below:

[Email Address Field]
ROLE OF A RESIDENT DIRECTOR IN CRISIS:

1. Can you describe your overall role and responsibilities on your campus?

2. What role do you have in crisis management?
   a. Who assigns you these responsibilities?
   b. Who trained you on these responsibilities?
   c. What type of training did you receive?
   d. Did you feel equipped to handle this incident?

3. Can you speak more about the experience of having a student death on campus—what happened, what was your role in the response?

4. How well did you know the student who passed away? Did this have any impact on your reaction and response to this incident?

5. When this death happened, how long had you been employed at that campus?

6. When this death happened, were you employed at a Catholic college or university?

POSTCRISIS SUPPORT

1. Following the student death on campus, what support services were offered to you and by whom?

2. How long after the incident were you offered this support?

3. Of the support you used, what did you choose to use that particular support service over others?

4. At any time, did you meet with a member of your campus ministry team?
5. Did you at any time participate in an on-campus mass or faith gathering? If you attended, how would you describe that experience?

6. If you received pastoral support, is this something you were offered (by whom) or actively sought?

7. Following the student death, did you take any time off? Why/why not? If so, how long?

8. How well did you know the student?

9. After the death occurred, how did you feel about working as Resident Director?

10. After the death occurred, how did you feel about working at the institution?

11. In retrospect, do you are there additional services that you would have utilized?

12. Are there any support services you would have like to have received, but you were not offered?

RELATIONSHIP WITH CATHOLIC IDENTITY OF THE CURRENT INSTITUTION:

1. Could you please describe to me your own faith background?

2. How do you engage your faith in times of crisis?

3. How did or didn’t you engage your faith after the student death?

4. Why did you select the institution you are at, now?

5. Describe to me your interpretation of your current institution's mission?

6. How important is your campus’ Catholic identity to your employment decisions and why?

7. How do you think your institution's Catholic identity impacts your employment experience?
8. Do you have any “expectations” about your employment experience because you work at a Catholic college?

9. How would you describe your relationship with campus ministers on your campus?

10. From your understanding, what was campus ministry’s role after the student death?

11. How do you learn about your college’s Catholic Mission and Identity?

12. If the death occurred while working at a Catholic institution, do you think the support you received was in alignment with your understanding of the Catholic identity of the institution? Please describe.

13. How do you think a Catholic institution should support staff after a student death?

FUTURE CAREER PLANS:

1. Have you ever experienced burn-out as a Resident Director?
   a. Why/why not?
   b. What do you think contributed to this?

2. Are you presently at the same institution where the death occurred? Could you explain why you stay/leave?

3. How has the loss of a student impacted your career and career decisions?

4. Why did you become a Resident Director?

5. What is your long-term career goal?
Dear [Chief Housing Officer],

As a fellow student affairs administrator, I am reaching out to you today in regards to a doctoral research study which focuses on the role of Resident Director staff at Catholic colleges and universities. As key members of a student affairs division, Resident Directors provide our campus communities with services that include programming, staff supervision, and emergency response. Unfortunately, these young professionals may be exposed to crisis during their tenure in these vital roles. This research explicitly explores how we, as student affairs practitioners at Catholic colleges and universities, can best support these staff members after a campus tragedy.

As the Chief Housing Officer at your campus, I am asking that you please forward this information to members of your departments that serve as Resident Directors. Recognizing that institutions use various names for this role on campus, this study specifically identifies a “Resident Director” as a full-time, live-on professional staff member within a student affairs division who directly supervises a residence hall, the para-professional staff within the hall, and the residential students. Therefore, please use this definition when determining to whom you should forward this information.

The following information is provided to help you and your team make an informed decision about participation in this research study:
Project: A Study of the Perceptions of Pastoral Crisis Intervention as a Crisis Debriefing Strategy Among Resident Directors at Select Catholic Colleges and Universities

Purpose: The purpose of this study is to establish if, in the context of their roles and responsibilities as first responders, Resident Directors at a purposeful sample of Catholic colleges and universities identify pastoral crisis intervention as a supportive resource following a student death on campus. This study further examines if these Resident Directors have expectations about faith-based crisis intervention resources due to their institutions’ Catholic identities.

Procedures: Participation in this research is completely voluntary, and is approved by the IRB at the University of New England.

This study is conducted in two phases. Participants are first asked to complete the following online survey, which will take approximately 15 minutes:

https://www.surveymonkey.com/s/KTDZHPR

In addition to the survey, Resident Directors may participate in a follow-up interview with the researcher. Respondents may indicate their interest in participating in this single-session interview by responding “yes” to the final survey question. The researcher will contact you directly. These recorded interviews will be conducted via phone at a mutually agreeable time. Resident Directors who complete the survey are under no obligation to participate in the interview stage.

Confidentiality: This researcher is committed to the ethical and professional standards set forth by NASPA, the ASACCU, and CAS, as well as the confidentiality of student information as so required under FERPA. At the conclusion of interview transcription, all
recordings will be destroyed. Names of individuals and institutions will be redacted and kept confidential.

Opportunity to Ask Questions: Should participants have any questions about this research and their participation, they may contact this researcher directly via email at lbertonazzi@une.edu or via phone at 508-566-4881 or the University of New England IRB at:

Olgun Guvench, M.D.
Ph.D., Chair of the UNE Institutional Review Board at (207) 221-4171 or irb@une.edu

Thank you for your time and participation in this valuable research.

Sincerely,

Laura Bertonazzi, Principal Investigator
University of New England Doctoral Candidate
APPENDIX E

CONSENT FOR PARTICIPATION IN RESEARCH

Project Title:

A Study of the Perceptions of Pastoral Crisis Intervention as a Crisis Debriefing Strategy
Among Resident Directors at Select Catholic Colleges and Universities

Principal Investigator(s):

Laura Bertonazzi, MS
University of New England
Student, EdD

Advisor(s): Dr. Kathleen Davis, University of New England
Dr. Michelle Collay, University of New England

You have been asked to participate in the second phase of a study that is examining the role that Campus Ministers and Resident Directors play in the crisis response system at Catholic Colleges and Universities. As a participant in the first phase, the electronic survey that was distributed to Resident Directors at small Catholic Colleges in New England, you self-identified as a participant that would be interested in participating in these interviews. This researcher anticipates approximately 10-15 Resident Directors will participate in this component of the study.
The purpose of this study is to identify how Resident Directors are involved in a campus response to tragedy, and how these staff members themselves receive support. Resident Directors play a key role on our campuses; this study ventures to examine how institutional administrators can best support their colleagues.

The goal of our time today is to discuss your experiences as a Resident Director who experienced the loss of a student on campus, and what resources you identified as helpful in your own coping process.

Please read this form, you may also request that the form is read to you. The purpose of this form is to provide you with information about this research study, and if you choose to participate, document your decision. You are encouraged to ask any questions that you may have about this study, now, during or after the project is complete by speaking with the principal investigator, Laura Bertonazzi (lbertonazzi@une.edu, 508-566-4881).

As we prepare for our interview today, please be advised of the following:

- You can take as much time as you need to decide whether or not you want to participate.
- Your participation is voluntary, and your responses are confidential.
- Your decision to participate will have no impact on your current or future relations with the University of New England or your employer.
- If you choose not to participate there is no penalty to you and you will not lose any benefits that you are otherwise entitled to receive.
- You are free to withdraw from this research study at any time, for any reason.
• If you choose to withdraw from the research there will be no penalty to you and you will not lose any benefits that you are otherwise entitled to receive.

• During our time together, you will be asked a series of questions about your experience as a Resident Director. You may decide to withdraw your participation at any time, and you are not obligated to answer any question that you are not comfortable with.

• Your name, institution’s name, and all identifying information will be removed, in accordance with Federal Laws surrounding student records. No individually identifiable information will be collected.

• Today’s conversation will be recorded and transcribed. All notes and recordings will be securely locked and only accessible to the researcher. At the conclusion of this research, all recordings and transcripts will be destroyed.
  
  o Please note that the IRB at the University of New England may request to review research materials.

• There are no foreseeable risks or hazards to your participation in this study.

• The location of today’s interview is mutually agreeable and in a location that assures a level of privacy.

• At the conclusion of this conversation, you will receive a small gift card; there are no other financial benefits to your participation in this research. Your participation will, however, indirectly inform the higher education community of important practices.
• The results of this research will be used for a doctoral research study at the University of New England. It may be submitted for further publication as a journal article or as a presentation.

A copy of your signed consent form will be maintained by the principal investigator for at least 3 years after the project is complete before it is destroyed. The consent forms will be stored in a secure location that only the principal investigator will have access to and will not be affiliated with any data obtained during the project.

If you would like a copy of the completed research project, you may contact the principal researcher directly.

If you have any questions or concerns about your rights as a research subject, you may call:

Olgun Guvench, M.D.
Ph.D., Chair of the UNE Institutional Review Board at (207) 221-4171 or irb@une.edu

You will be given a copy of this consent form.
Participant’s Statement

I understand the above description of this research and the risks and benefits associated with my participation as a research subject. I agree to take part in the research and do so voluntarily.

________________________________________________________________________

Participant’s signature/Legally authorized representative Date

________________________________________________________________________

Printed name

Researcher’s Statement

The participant named above had sufficient time to consider the information, had an opportunity to ask questions, and voluntarily agreed to be in this study.

________________________________________________________________________

Researcher’s signature Date

________________________________________________________________________

Printed name