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Assessing and Preventing the Risk of Burnout In the Resident Assistant Position

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Assessing and Preventing the Risk of Burnout
In the Resident Assistant Position
by
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Master's Project
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Caroline Murray

Abstract

Resident Assistants (RAs) are student leaders who serve on the front lines of college student care. Due to the demanding and often conflicting nature of their assigned responsibilities, students who serve in this role do so at high risk for mental and emotional burnout. This project will assess and interrogate the main factors that contribute to RA burnout. These factors include role ambiguity, compassion fatigue, and job severity. This project will also provide intervention strategies that will prevent and mitigate this risk of burnout. These strategies include implementing a mental health-centered RA training, mandating RA-specific counseling services, and implementing an on-call counselor or social worker to address resident crises. Student Affairs Professionals (SAPs) must work to reform the current preparation, responsibility, and care of these critical student leaders if institutions of higher education are to continue to utilize their services for community development, resource referral, and crises intervention.

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Chapter One: Introduction

Problem Statement

Resident Assistants (RAs) are essential student leaders who are vulnerable to burnout as a direct result of their varying obligations. RAs must balance responsibilities of community building, mental health counseling, crisis response, and policy enforcement (Bubbers, 2016). The ambiguity and severe nature of these obligations can have negative impacts on the RA's mental health and lead to a level of burnout that can affect role and student performance (Hardy & Dodd, 1998). With the incoming generation of college students already being challenged with increasing mental health issues, the role of the RA and its effects will be emphasized (Seemiller & Grace, 2016). Institutional reform in the preparation, responsibility, and care of RAs needs to be considered if universities are to continue to benefit from their services. RAs essentially are students who serve on the front lines of student care in colleges and universities (Stoner, 2016). The services they provide directly link to university retention (McLaughlin, 2018). One of these services is that of being a counselor to residents (Bliming, 2010). As college students grapple with the stressors of college including but not limited to the adjustment to college, academic and social pressures, and varying crises, they turn to their RAs for guidance (Bliming, 2010). This role is critical to ensuring that students can navigate the institution alongside their own development and graduate as intended. If RAs are struggling with burnout because of their role, they will be unable to perform said role effectively for the students they serve (Hardy & Dodd, 1998). The purpose of this Master's Project is to examine the main factors that contribute to RA burnout including but not limited to role ambiguity, compassion fatigue, and severity of job responsibilities. Additionally, historical, theoretical, and political perspectives will be interrogated to understand how this problem came to be and how it persists. Finally, potential

intervention strategies that could prevent or mitigate burnout will be prescribed using the information examined in the literature.

Importance and Rationale

It is imperative that student affairs professionals (SAPs) work to prevent the burnout of resident assistants because they are an immeasurably valuable peer resource for community building, policy enforcement, and resource referral. RAs serve as the front lines for college student care and is tasked to perform a variety of responsibilities that create a safe, inclusive, and engaging living environment for college students in residential housing. (Stoner, 2016; Gentry et al., 2007). RAs play an important role by developing interpersonal relationships and serving as an approachable and knowledgeable peer-advisor (Gentry et al., 2007). Beyond mentorship and community building, RAs are valuable in the referral of residents to resources that address mental health (Stoner & Zhang, 2017). This referral aspect of the RA role is growing more important, making the need to mitigate RA burnout increasingly important. If an RA is experiencing burnout, they will not be able to perform to the best of their ability, leaving their residents in a situation where they may not get connected to vital mental health resources. If left without intervention, mental health concerns in these students can lead to a negative impact on academic success, physical health, and overall quality of life (Oswalt et al., 2020). This makes the need for RAs to be able to serve fully and intervene in resident mental health concerns a crucial one. The need to ensure RAs can handle mental-health intervention will become increasingly important as colleges address an increased presence of mental health concerns in Generation Z and the growing mental health concerns caused by the COVID-19 pandemic (Bethune, 2019; Son et al., 2020).

Background

Development of RA Burnout as a Critical Issue

Historical and Political Context. The RA role has been growing in its scope and severity since the 1970s (Boone et al., 2016). The role has become a multifaceted position that has developed in complexity due to federal activity (Boone et al., 2016). An article by Boone et al. (2016) breaks down the historical development of the RA role from colonial times to the modern era of university residence life. In the early years of residential living on college campuses, institutions functioned *in loco parentis* meaning that they served in place of parents. In this time, retired military officers and housemothers were tasked with enforcing order in the residence halls, with hired student staffs that aided in this endeavor. These student staffs were the first iterations of RAs through the early 1960s. The age of *in loco parentis* ended in 1971 with the ratification of the 26th amendment that changed the age of majority from 21 to 18. This change developed the paraprofessional position of the Resident Assistant. Since then, the role of the RA has grown to develop varying, overlapping responsibilities that cultivate student success and belonging (Boone et al., 2016).

This role is heavily influenced by public policy. For example, the development of the Family Educational Rights and Privacy Act (FERPA) in 1974 implemented a new level of confidentiality and reporting measures for RAs to navigate (Boone et al., 2016). Additionally, the Cleary Act named in 1998 required timely warnings of campus crimes, making the reporting responsibilities of the RA more pertinent (Boone et al., 2016). Title IX alongside the Cleary Act place RAs in the pertinent position of serving as “responsible employees” or “mandatory reporters” who must report Title IX disclosures to the institution (Holland & Bedera, 2019);

Holland & Cortina, 2017). A lack of standardized training handling these severe challenges can lead to role ambiguity and compassion fatigue (Holland & Cortina, 2017; Owens, 2011)

Basic Structures of the RA Role. These federal decisions have shaped the RA role as it is known today. Today, the RA role is a vital resource for institutions in the support and maintenance of college students who reside in residence halls. The RA is expected to carry out a variety of responsibilities, including (but not limited to) community development, resource dissemination, policy enforcement, peer counseling, program development, and crises response (Stoner, 2016). While these overlapping and demanding responsibilities can lead to stress, the context they are performed in can also add a layer of pressure to the RA role. One contextual aspect is that of the RA being required to work where they live (Benjamin & Davis, 2016). Typically, RAs are required to live in a residence hall to be accessible to the needs of their residents (Benjamin & David, 2016). While this may be essential for RAs to be able to see signs of mental health distress or other needs in their hall, it creates an inability for the RA to step-away from their role (Everett & Loftus, 2011). Whereas other student leaders have the ability to schedule out their responsibilities (for example, a student government officer having specific meeting and office hours to perform their duties), the RA is expected to serve a resident at a moment's notice in the space that they reside in (Everett & Loftus, 2011). The role also requires the RA to be available nearly 24 hours a day for what can be weeks at a time (Paladino et al., 2005). This creates an endless feeling of obligation to the RA role (Everett & Loftus, 2011). This constant obligation makes it difficult to separate work and personal time (Stoner & Zhang, 2017). A lack of separation can also lead to poor boundary development in RAs (Paldino et al.) When RAs have poor boundary development or have not been trained to grapple with the nonstop nature of their role, they grow overly involved with their residents and become

emotionally exhausted (a trait that if uninterrogated can lead to burnout) (Paladino et al., 2005). In the age of social media and cellphones, this 24/7 nature is emphasized (Mangan, 2021). Additionally, the constant role of being a first responder leads to the issue of burnout caused by the RA position. Even beyond shifts aligned in duty rotations, RAs are expected to fulfil the responsibility of a policy enforcer and responder to conflict and crises (Everett & Loftus, 2011). These basic tenants that have shaped the RA role (responding to changing policies and mandates, serving in a live-in position, and serving constantly as a first responder and policy enforcer) in such a way that leaves them vulnerable to high stress and burnout as a direct result of their role.

Persistence of the Issue

Pressure of Balancing Student and Student Leader. One way that this issue persists comes from the identity of the RA as a student. The near-constant demands of the RA role places these student leaders in a challenging balancing act where they must give due attention to their RA role as well as their academic pursuits (Bubbers, 2016). With the large scope of the role, an RA may have a difficult time prioritizing their coursework over their RA responsibilities (Bliming 2003). This struggle to keep up with academics deepens the stress the RA feels beyond their RA responsibilities, continuing the presence of burnout in the role. Furthermore, the RA role clashes with the social needs that come with being a student. The RA role has the capacity to negatively impact an RA's ability to develop and maintain friendships and relationships (Bubbers, 2016). This lack of social support furthers the vulnerability to burnout faced by the RA.

Insufficient Training for Stress Management. RA training has room for reform. A staple responsibility for SAPs in housing and residence life, the development of RA training needs to grow to encompass conversations surrounding mental health burnout, compassion

fatigue, and boundary setting. A study by Hardy and Dodd (1998) discovered that neither stress management nor burnout was a common goal for RA training amongst surveyed institutions of higher education. In this study, burnout was listed as a covered topic by only 33% of institutions. Reviewed literature indicated a need for RA training initiatives that surround conversations focused on burnout and secondary traumatic stress. Additionally, RA training should discuss the implementation of personal wellness plans to prevent the level of stress that leads to burnout (Lynch, 2019b).

Growing Mental Health Concerns. A stressful and pertinent responsibility of the RA is to be a responder to resident mental health concerns. This exposure to students experiencing or processing trauma leads RAs to experience secondary trauma and or compassion fatigue (Lynch, 2019b). This issue can be expected to further persist with the trends shown in data regarding Generation Z, as Generation Z is reported to experience increasingly poor mental health conditions when compared to earlier generations. With Generation Z encompassing students born between 1995 and 2010, this is the generation arriving to college residence halls at the time that this project was developed (Seemiller & Grace, 2016). These students are arriving with increasing concerns surrounding mental health (Seemiller & Grace, 2016). RAs will need to serve at the ready to aid these students in navigating their mental wellness and traumas on the college campus, a service that places them at risk for compassion fatigue and eventually burnout (Lynch, 2019b). Additionally, with students potentially finding their campus counseling centers inaccessible (due to limited hours, lack of staffing, or counseling-related stigma), RAs are under greater pressure to perform when taking on this obligation (Seemiller & Grace, 2016). With expected mental health trends after the COVID-19 pandemic pointing towards an increase in concerns, this risk of burnout is set to persist if uninterrogated (Son et al., 2020).

Statement of Purpose

RA burnout is an issue that must be interrogated and mitigated if institutions are going to continue benefiting from RA services. This project aims to explore and understand the main factors that contribute to RA burnout. These factors include, but are not limited to role ambiguity, compassion fatigue, and job severity. In exploring these factors, SAPs will be made aware of the conditions in which RAs are positioned for burnout vulnerability. These factors will be dissected through examining relevant literature. This project will also address the potential consequences of leaving this issue unattended, affecting both the RA as well as the residents they serve.

After identifying the factors that foster RA burnout, potential solutions for SAPs in housing and residence life to prevent and mitigate RA burnout will be prescribed. The first potential strategy will be developing a bolstered RA training that centers mental health in both role and referral to equip RAs for the stress associated in their position. This training will help prepare RAs to face the pressures of their role while preparing them to effectively refer their residents to professional services. The second strategy will be to develop the position of a counseling professional dedicated intentionally for the support and care of RAs. This role will serve as way for RAs to process the secondary trauma they are tasked to grapple with while developing skills in coping and navigating stress. The final strategy prescribed will be to utilize an on-call social worker or counselor that can shift the emotionally heavier aspects of the RA role onto the load of trained staff and away from that of developing students. This approach would reduce the exposure that RAs have to secondary trauma as well as reduce the role severity that is associated with serving as a first responder to student crisis.

Objectives

The objective of this project is to provide guidance for SAPs who are looking to reduce RA burnout by addressing its varying causes and providing informed, action-based solutions. As a result of this project, SAPs will be able to: identify and contextualize factors that contribute to RA burnout, identify how the RA role places intense pressures on the student serving in the role, and use the information gathered by assessing the literature to develop a recommendation to housing and residence life departments based on the prescribed solutions. In identifying the factors of RA burnout, SAPs should be equipped to recognize potential signs of stress in their paraprofessional staffs and articulate the potential sources of these stressors. In understanding the pressures placed on RAs, SAPs should be able to make informed decisions about the necessary scope of the RA role at their institution. In grappling with prescribed solutions, SAPs should be able to assess the potential of bolstering RA training practices and developing professional roles that can intervene as support services for RAs.

Definition of Terms

Resident Assistant: It is important to note that the exact position responsibilities, compensations, and expectations placed upon resident assistants or resident advisors can differentiate across institutions. For the purposes of this project, the resident assistant (RA) is defined as a paraprofessional student leader serving in a live-in residence hall capacity to support students (residents) through peer mentorship, resource referrals, policy enforcement, crises response, and other responsibilities that work to promote a healthy and successful residence hall community (Boone et al., 2016).

Burnout: Hardy and Dodd (1998) describe burnout as “a syndrome consisting of emotional exhaustion, depersonalization, and reduced personal accomplishment that can occur among individuals who do ‘people work’” (Hardy & Dodd, 1998, p.499). Burnout is a condition that is initiated with mild symptoms and can build over time (Stoner, 2017). Employees who are vulnerable to burnout can be attributed to making personal sacrifices, working long hours, and having a dedicated need to give to others (Stoner, 2017). Dimensions of burnout include increased emotional exhaustion, increased depersonalization, and lowered sense of personal accomplishment (Stoner, 2017). The most apparent of these is emotional exhaustion, which can show as a feeling of being emotionally overextended (Stoner, 2017).

Role Ambiguity: Role ambiguity refers to the feeling of uncertainty one feels regarding their roles and responsibilities (Bubbers, 2016). Role ambiguity occurs when one’s role is complex, difficult to train for, or carries conflicting duties (Bubbers, 2016; Everett & Loftus, 2011). Role ambiguity creates a sense of not knowing how to function or feeling a lack of self-efficacy when performing a role (Bubbers, 2016). If unaddressed, role ambiguity and the stress it provides can lead to burnout in RAs (Bubbers, 2016).

Compassion Fatigue: Compassion fatigue is the intersection of burnout as a function of role stress met with secondary traumatic stress (Lynch, 2019b). Secondary traumatic stress is the behaviors and emotions that occur from knowing about a traumatizing event experienced by another person. It is stress that results from helping or wanting to help someone who is suffering or going through trauma (Figley, 1995 as cited in Owens, 2011).

Job Severity: For the purposes of this project, the term “job severity” describes the intense, high pressure responsibilities that are attached to the RA position. Job severity can allude to the obligation of serving as a first responder to issues such as fire and active shooter

response, mental health crises, and Title IX misconduct (Owens, 2011; Letarte, 2013; Lynch, 2019b). Job severity could encompass both the action taken by the RA or the pressure associated with being expected to perform the intense responsibilities that could impact the life and wellbeing of another person.

SAP: *SAP* is an acronym used in this project to mean student affairs professionals. *SAPs* are professional-level institution members who work in a student development context.

Project Scope

This project will address the varying factors of the RA role that can place students who hold it in a state vulnerable to burnout. It will utilize relevant literature to inform the reform and development of practices and positional changes within departments of housing and residence life at institutions of higher education. Specifically examined will be the presence and persistence of role ambiguity, compassion fatigue, and job severity in the RA position. Additionally, the impact of burnout on the RA and their residents will be identified. Furthermore, this project will prescribe three action steps that could be implemented at institutions to prevent and mitigate burnout. The first prescribed step will be the bolstering of a mental health-centered RA training to address stress transparency and coping strategies for grappling with responsibility-based pressures in the RA role. The second prescribed action step will be the implementation of a counseling service for RAs to utilize as a processing space to navigate the emotional exhaustion of the RA role. The final action step will be a call for institutions to implement on-call or embedded social workers or counseling professionals to take on some of the high-intensity responsibilities otherwise left to student leaders. This project is not created for direct implementation at a specific institution, but rather aims to guide informed practices and decisions around burnout in the RA role.

Chapter Two: Literature Review

Introduction

When providing potential solutions to a critical issue, it is vital to review pertinent literature that dives into not only how the issue came to be, but also how it persists. In looking at identifying the main causes of burnout in students in the RA position, several themes were identified. These themes revolved around concepts of role ambiguity, compassion fatigue, and job severity. In this literature review, these themes are explored and connected specifically to the RA role. Before examining these themes, this review first discusses the theoretical lens in which this topic is viewed. Schlossburg's developmental theory around mattering and marginality and Schlossburg's Transition Theory offers a lens in which to examine the causes and effects of RA burnout. After discussing the theoretical perspectives, this review provides an overview of the RA role in general. While this project honors the fact that the RA role varies slightly across institutions, it is also understood that there are commonalities that define what it means to be a student in a residential advisory capacity. When discussing what this role entails, this review connects the role to its greater impact on university communities to further validate the need for this project. In addition to providing an overview of the RA role, this review also examines the historical and political perspectives that have influenced the greater issue of RA burnout and aided in its persistence. Next, the common themes of role ambiguity, compassion fatigue, and job severity are explored through the literature. Through these themes, the literature explores how these factors affect not only the RA, but also effect the residents they serve. Additionally, alternative functionalist-based perspectives around the development of resilience in the RA role are addressed. Finally, the critical points made in the literature are summarized to justify the severity of the problem of RA burnout.

Theoretical discussion

Mattering and Marginality

The first theory used as a perspective for this topic is Schlossberg's iteration of mattering and marginality. This theory addresses a need for individuals to feel as though they matter to others. A lack of this perception of mattering can lead to a person feeling a sense of marginality (Patton, 2016). Marginality can be described as a sense of "not fitting in" or feeling a lack of belonging that can lead to self-consciousness, irritability, and depression (Patton et al., 2016). While this may be a temporary feeling, it can occur when individuals transition into new roles (Patton et al., 2016). Feelings of marginality can especially occur when individuals take on new roles and feel ambiguous about what the new role entails (Patton et al., 2016). The greater the transition into the new role, the more marginality a person may feel, especially if there are limited perceived norms in the role (Schlossberg, 1989). In a study by Stoner, (2016) on RA perceptions of mattering, burnout, and job satisfaction, it was found that RAs who perceived a lower level of mattering to their residents held increased feelings of burnout and chose to not return to their position (Stoner, 2016). Additionally, the study found that the presence of mattering, or lack thereof, was a significant predictor of depersonalization and lack of personal accomplishment: two dimensions associated with burnout (Stoner, 2016). This idea of mattering is especially critical when examining the impact of role ambiguity in the RA role. If the RA is unclear of what their role entails or is unclear of the nature of relationship they are to have with their residents, this could contribute to lower levels of mattering and higher risk for burnout. An additional factor that could lead to a depleted sense of mattering is that RAs may seldom see the impact of their efforts on their residents, and therefore may not grasp the importance that they play in a resident's life (Stoner, 2016). For example, an RA who spends a great deal of energy

untangling a complicated roommate will likely leave that mediation with disgruntled residents who may have had to compromise on a living agreement. That RA will not see the impact of that mediation, which could be the development of communication skills in those residents that will lead to fewer conflicts in their lives after college. The inability to see this long-term impact may leave an RA without validation that they matter to their residents. Additionally, RAs have limited access to success indicators, like GPA records, that would help them see the tangible successes they have helped their residents achieve by fostering environments where they could thrive (Stoner, 2016). This inability to grasp a sense of mattering could be a factor that contributes to burnout in the RA role.

Transition Theory

The second theory being used to perceive this issue is Schlossberg's transition theory. This theory provides an examination on defining transitions and outlines how a perceived transition may impact an individual (Patton et al., 2016). According to Goodman, Schlossberg, and Anderson (2006), a transition can be defined as "any event or non-event which results in changed relationships, routines, assumptions, and roles" (Goodman, Schlossberg, & Anderson, 2006, p.33). According to Schlossburg as cited in Patton et al. (2016), the theory predicts the effectiveness that one would have in coping with a transition based off four main tenants: situation, self, support, and strategies. Through this lens, this literature review views the change from being a college student without residence life responsibilities to being an RA as a transition. Transitions can alter one's life (Schlossburg, 2011). To understand the meaning the transition of being an RA could have on a student, Schlossburg, as cited in Patton et al. (2016) suggests investigating the type, context, and impact of the transition (Patton et al., 2016). The type of the transition resides in if it is considered anticipated or unanticipated (Patton et al., 2016). One

could consider the transition to being an RA one that is anticipated since the prospective RA must apply for, interview for, and accept the offer of becoming a resident assistant. The context of the transition has to do with one's relationship to the transition (Patton et al., 2016). The context of taking on the RA role surrounds the fact that the role takes place both in the professional realm of one's life and the realm of one's home. This can make for a complicated context. Finally, when assessing the impact of a transition, one must look at the degree to which it alters one's life (Patton et al., 2016). It can be argued that the acceptance of the RA position alters the life of a college student greatly. For one, the student takes on the role of a policy enforcer, educator, and first responder – a series of high responsibilities previously not upheld. For another, it may not only change where they student may live, but it also changes the relationship that student has with their living space. No longer does the student remove oneself from responsibility by closing the door to their bedroom. Rather, the RA takes on what feels like a 24/7 obligation that cannot be escaped (Everett & Loftus, 2011). When assessing the combined type, context, and impact of the transition to becoming an RA, one can perceive it as a meaningful transition that may place a great deal of stress on those who go through it. This is a transition capable of altering several facets of the students' lives, including their social, academic, and residential worlds.

Schlossburg's theory suggests identifying one's location within the "4 S's of transition" to determine the effectiveness one may have in coping with that transition (Patton, 2016). These facets include situation, self, support, and strategies. When looking at a student's ability to cope with the transition to being an RA, one must first see how the RA views the situation of the transition. One factor that may be salient in this situation is the presence of multiple stressors alongside the transition. For the new RA, or even a seasoned RA, these stressors may include

academic and vocational pressures, mental health concerns, and additional struggles that come with being a college student. Next, one must view how their “self” can affect their ability to cope with the transition (Patton et al., 2016). This means looking at the personal demographics that may affect how one views life and the psychological resources at one’s disposal (Patton et al., 2016). The literature shows that RAs who identify as female face psychological barriers that their male counterparts do not (Cousineau & Chambers, 2015). Additionally, RAs who identify as introverted may have a more difficult time preparing for the transition to a highly social role than their extroverted counterparts (Deluga & Masson, 2000). Based on the identity a student holds, they may be more vulnerable to a difficult transition period. Next, sources of support can be identified to determine one’s ability to cope successfully through transition (Patton et al., 2016). Sources of support can include, but are not limited to: intimate relationships, family units, network of friends, and institutions or communities (Patton et al., 2016). When considering taking on an RA role, a student should consider these support systems and how they may be salient when making this transition. For example, would a student’s network of friends change due to their new label as a policy enforcer or a new busier schedule? The scope of the RA role makes it challenging for the RA to build and maintain friendships (Bubbers, 2016). Institutions also should consider themselves a support system in this transition and could choose to bolster services that help the RA process and transition into this role. RA training is a staple responsibility of offices of residence life and could be used as a tool to help RAs navigate their transition into the role effectively (Hardy & Dodd, 1998). Finally, Schlossburg suggests that one assess the varying strategies available to cope through transition (Patton et al., 2016). Schlossburg suggests employing methods of information seeking, direct action, inhibition of action, and intrapsychic behavior (Patton et al., 2016). Regarding information seeking,

something a student may consider before and during the transition to becoming an RA would be to consult with students currently serving in the role to gain a realistic perspective on what the role entails. Additionally, a key action that could be taken by offices of residence life could be to provide training materials that are upfront regarding the transition from being a “typical” college student to being an RA (Cousineau & Chambers, 2015). Transitions can provide great stress, and the transition into being an RA could be especially stressful for college students who already must tackle the responsibilities of being a full-time student. Throughout this literature review that discusses the stressors of serving in the RA role, it is critical to understand the role through the lens of transition to understand how the experience of an RA differs from the experience of other college students.

Research & Evaluation

Role of the Resident Assistant

There are thousands of student leaders serving as RAs in the United States (Whitney, Early, & Whistler (2016). These students serve on the front lines for care in residence halls at colleges and universities (Stoner, 2016). As the role of the RA becomes increasingly complex, it is to be acknowledged that the specific tasks, experiences, and compensation for RAs differ between institutions. However, there are common responsibilities that most RAs across the country hold. These responsibilities include but are not limited to connecting with residents and providing programming to foster a sense of community, disseminating resources and policy information to residents, serving as a policy enforcer, and serving as a peer counselor, educator, and role model (Stoner, 2016). Additionally, RAs must serve as the responders to crisis. These crises include Title IX infractions, medical emergencies, mental health crises, and dangers brought upon the residence hall community (Hardy & Dodd, 1998). The RA is tasked to manage

these often demanding and, at times, conflicting obligations while maintaining promising academic standing with their institution. The roles and responsibilities of the RA is described as a 24-hour duty that a student does not abandoned when leaving the residence hall during their time at the institution (Hardy & Dodd, 1998). RAs are considered one of the first resources a resident will seek out in times of need, making the work they do essential to their communities (Stoner & Zhang, 2017). It is typically a requirement for the RA to live in residence to be at a resident's aid when needed (Benjamin and Davis, 2016). Because of this, most RAs receive compensation via free or reduced room and board expenses (McLaughlin, 2018). The RA role has become increasingly important for institutions of higher education. The communities fostered by their efforts benefit the personal development and academic performance of their residents (Manata, DeAngelis, Paik, & Miller, 2017). Additionally, RAs are important in referring students to resources to aid with mental health, and serve as a vital resource for the intercultural growth of their residents (Stoner & Zhang, 2017).

Historical and Political Perspective

The RA role has been expanding in both range and severity of responsibility since the development of the 26th Amendment by the United States Federal Government. After the 26th amendment changed the age of majority from 21 to 18, the age of *in loco parentis* ended in 1971, developing the paraprofessional position of the RA to serve as both a mentor and an enforcer of policy for the university (Boone et al., 2016). Before this amendment, the role of maintaining order and control in university residential housing belonged to retired military officers and elderly housemothers who primarily served to enforce policy rather than serve as mentors (Boone et al., 2016). Since then, the role has grown to be a comprehensive position stacked with varying, overlapping responsibilities. In the historical context, public policy and major national

events have influenced the RA position to grow it to be the all-encompassing role it is today. The interaction between legal instruments such as FERPA and Title IX make the RA role one that holds greater potential consequences than other student leadership opportunities. The responsibility of enforcing these policies mean that the RA could potentially serve as a source of liability for the institution. For example, an RA's failure to report an instance of sexual assault could place the institution in violation of Title IX (Boone et al., 2016). This pressure to effectively perform a role that could have legal implications on the RA's institution can be connected to the stress that may lead RAs to burnout. Since the creation of FERPA and Title IX, RAs are now expected to be vigilant of their residents' changing conditions to report information to the institutions they serve (Boone et al., 2016). Additionally, since the 2007 shooting at Virginia Polytechnic Institute and State University, RAs are expected to play the part of a critical observer and reporter of potential threats and crisis (Boone et al., 2016). The nuances of these dynamic policies and the severity of what they represent work to create a high-demand role that sets the stage for burnout to occur in these student leaders (Boone et al., 2016).

Tenants of Burnout in the RA Role

Role Ambiguity. The RA is tasked to balance a wide variety of roles. These roles can often directly conflict and can be presented without clarity. Additionally, the individualistic nature of working with many college students makes for a role where it is impossible to be trained beyond general policies and guidelines. These factors and more combine to present a strong feeling of role ambiguity for RAs. Role ambiguity is the uncertainty one feels regarding their role and or responsibilities (Bubbers, 2016). Due to the complex and often conflicting nature of the RA role, RAs are vulnerable to experiencing role ambiguity. This can lead to greater depersonalization and burnout. The role of the RA is made more complex due to its

connection to university and federal policy (Boone et al. 2016). When federal or state governments alter policies like Title IX, or when institutions change their internal policies, the RA is expected to adapt to disseminate this policy to their residents and enforce this policy on their floors (Boone et al., 2016). Changing policies that lead to changing responsibilities contribute to the feeling of role ambiguity.

In addition to having to navigate changing policies, the RA must navigate the changing relationships they have with their residents. In a study by Everett & Loftus (2011), it was found that surveyed RAs understood that policy enforcement was a critical aspect of their role, but they felt unprepared to confront their residents for conduct violations (Everett & Loftus, 2011). The social role the RA fulfills as a peer, counselor, and even friend to their residents can clash with another social role they play as an authority figure in student conduct (Everett & Loftus, 2011). As an RA, one is expected to address policy violations while still working to nurture a close-knit community of peers. In navigating these distinct demands, RA struggles. This struggle, like the other causes of RA burnout, is exemplified by the 24/7 nature of the RA's live-in role (Everett & Loftus, 2011). Regarding role ambiguity, the nonstop nature of the role creates a feeling that the RA must fulfill this balance even when they are off duty (Everett & Loftus, 2011). This makes messy the line between the identity the RA has of a student and as a paraprofessional staff member. Where RAs can be peers and friends with residents outside of their RA role, they are still expected to carry the weight and responsibility of policy enforcement. This can make it difficult for RAs to develop and maintain support systems within their residential communities, as the unclear boundaries make for a feeling that one can never get too close to their residents because of the role they play as a policy enforcer (Everett & Loftus, 2011).

This role ambiguity also makes it difficult for the RA to perform their role, which causes a lack of perceived mattering that could also lead to burnout. RAs must make themselves an approachable community member if residents are to feel comfortable disclosing concerns to them (Wilson & Hirschy, 2003). This approachability is placed in jeopardy with the obligation to enact authority. A great deal of pressure is also placed on the RA when these policy violations impact the residents' transcripts or relationship with the institution (Wilson & Hirschy, 2003). This causes stress for the RA, who may feel nervous to enforce policy or confront a resident. This stress weighs heavy on the RA and impacts them professionally and socially (Wilson & Hirschy, 2003).

Beyond the strain of navigating resident relationships, the role ambiguity faced by an RA can come from the wide scope of responsibilities the RA is expected to take on. This wide range of obligation is exceedingly difficult to train for. In RA training, a student may be presented with a broad range of skills that can help them triage a variety of situations (Bubbers, 2016). However, due to the individualistic nature of their role, the RA will likely feel unprepared to handle the unique and often personal situations they are confronted with (Bubbers, 2016). This feeling of a lack of preparation can lead to role ambiguity in the sense that the RA does not know the full scope of their obligations. In the sixth edition of his foundational book, *The Resident Assistant: Applications and Strategies for Working with College Students on Residence Halls*, Gregory Bliming (2003) sums up how the wide scope of the RA role leads to burnout:

To be called to do so many tasks, to hold so many responsibilities, and to be accountable for so many people during the time when you are shaping your own education is one of the greatest challenges you will face during early adulthood. (p.18).

Compassion Fatigue. The RA role is student-centered and focused on human issues. The result of working closely with human issues, such as mental health concerns, Title IX infractions, or general student crises leads the RA to experience compassion fatigue and secondary trauma (Lynch, 2019b). Figley (1995), as cited in Owens (2011) defines secondary traumatic stress as the behaviors and emotions that occur from knowing about a traumatizing event experienced by another person. It is stress that results from helping or wanting to help someone who is suffering or going through trauma (Owens, 2011). Lynch (2019b) defines compassion fatigue as the cross between burnout as a function of job stress and secondary traumatic stress as a function of exposure to individuals in trauma. Compassion fatigue can be linked to several negative outcomes such as anxiety and depression, decreased productivity, and lowered sense of self-worth (Lynch, 2019a). RAs serve as first responders to the trauma of their residents. A dissertation study by Choloduik (2003) described that when RAs had to address issues related to suicide attempts, alleged assault, and loneliness, they had to expend a great deal of energy to help the students involved. The act of managing crisis and supporting students in trauma are constant and critical aspects of live-in residential life roles (Lynch, 2019a). The amount of trauma RAs are being tasked with responding to is growing because of changing college demographics. There is a considerable increase in not only the number of college students reporting having experienced a trauma event, but also an increase in the severity of these trauma events (Lynch, 2019b). This increase is difficult for institutions to keep up with. A study by Lynch (2019b) reported that 43% of college counseling centers reported an increased number of students struggling with sexual assault and increases in students who are experiencing severe psychological disorders. This issue can be expected to further persist with the trends shown in data regarding Generation Z, as Generation Z is reported to experience increasingly poor mental

health conditions when compared to earlier generations. With Generation Z encompassing students born between 1995 and 2010, this is the generation arriving to college residence halls at the time that this project was developed (Seemiller & Grace, 2016). This indicates that RAs will continue to increasingly respond to mental health concerns in residents. Additionally, with students potentially finding their campus counseling centers inaccessible (due to limited hours, lack of staffing, or counseling-related stigma), RAs are under greater pressure to perform when taking on this obligation (Seemiller & Grace, 2016). With expected mental health trends after the COVID-19 pandemic pointing towards an increase in concerns, it would appear as though this risk of burnout is set to persist if uninterrogated (Son et al., 2020). This makes the threat of compassion fatigue a growing concern for students serving in this role.

Frequent traumas experienced by college students include, but are not limited to academic crises, economic hardships, anxiety and depression, suicidal ideations, eating disorders, substance abuse, and sexual violence (Lynch, 2019b). The fact that RAs must directly serve as a resource for these students who may be struggling with any number of these concerns places them in a space where they are vulnerable to compassion fatigue. RAs are tasked with managing the needs of these residents as they navigate this trauma until they can receive professional assistance (Lynch, 2019b). The need to respond immediately to these concerns is critical. Mental health problems can greatly impact nearly every aspect of a student's life (Kitzrow, 2009). These aspects can include physical and emotional health as well as academic performance and retention (Kitzrow, 2009). Therefore, these concerns cannot be ignored by the RA, and the RA can play a vital role in referring students to professional resources. A study by Lynch, (2019b) found that providing support for residents experiencing suicidal ideation had the most significant impact on RA self-reported levels of compassion fatigue (Lynch, 2019b).

Claiming the lives of 1,100 college students each year, suicide is the second leading cause of death amongst college students (Hibbs & Rostain, 2019). This compassion fatigue also links to role ambiguity. If an RA does not have a clear understanding on the boundaries and expectation of their role, or are consistently exhausted, they cannot provide adequate care for the residents who they are so eager to help, leading to feelings of incompetence or failure.

Additionally, the social demands placed on the role can lead to a sense of compassion fatigue. This demand can be made unequal depending on the RA it is placed upon. In a study by Cousineau and Chambers (2015), the gendered experience of being an RA was examined. The study found that female-identifying RAs are more likely to be called upon to handle situations where they had to act as mediators whereas their male-identifying counterparts had to handle concerns that were centered around a need for authority (Cousineau & Chambers, 2015). The study also indicated that female-identifying RAs were more likely called upon to serve as a peer counselor or advisor than their male-identifying counterparts (Cousineau & Chambers, 2015). This indicates that female-identifying RAs could be more vulnerable to compassion fatigue, as they may be more likely to be exposed to situations where they are aiding a resident in the navigation of trauma. These potential discrepancies in lived experience should be taken into consideration when addressing the presence of compassion fatigue.

Job Severity. The RA role tasks developing college students with serving as the preventors and first responders to crises (Boone, Bauman, & Davidson, 2016). This obligation has the potential to affect a variety of stakeholders beyond the floor the RA serves on (Bubbers, 2016). The ever-changing policies that impact an RA could in-turn impact the institution if the RA is unable to follow these policies properly. These policies include, but are not limited to, fire and active shooter response and Title IX misconduct. The potential legal implications of these

policies place stress on the RA. This stress can come from the label RAs must wear as mandatory reporters, or responsible employees. Under this label, the RA must identify when their residents are struggling in a way that would require referral to a professional staff member (Letarte, 2013). This means that they need to not only understand the current and potentially complex protocols and channels of reporting, but they must also be able to recognize the signs of these struggles in their residents (Letarte, 2013). The RA is considered a legal extension of the university under agency law as a responsible employee (Letarte, 2013). While being considered first responders on the front lines of student concern and development, legally RAs do not have the benefit of immunity like professional first responders do (Letarte, 2013). The lack of this benefit places the RA in a risky situation where liability could be created on behalf of their institution as a result of their actions (Letarte, 2013). Role ambiguity also plays a role in this stress caused by job severity. With the RA role being a live-in position, it is challenging to define when the RA is within the scope of their employment (Letarte, 2013). Employers are liable for employee actions that occur within the scope of employment (Letarte, 2013). Therefore, the RA resides in a constant pressure to remain vigilant for concerns, even outside of their assigned hours “on-duty.” The seemingly never-ending nature of the mandatory reporter label combined with the potential legal implications of missteps in implementing policies make the RA’s responsibilities more severe, and more stressful, than that of a typical student leader.

The severe concerns faced by resident assistants stretch beyond policy. RAs must work with students who are navigating crises that could dramatically impact their lives. For example, a common issue that RAs face is the presence of eating disorders amongst their residents (Owens, 2011). Additionally, RAs must help counsel and refer services to students who are navigating substance abuse (Owens, 2011). These are struggles commonly found in college-aged students

that could result in harm to the student, hospitalization, or in the worst cases, loss of life. The RA is not only tasked with addressing these issues as they are brought to their attention by residents or roommates of residents, but they are also expected to understand the symptoms and signs of these struggles effectively enough to refer residents to professional services in a timely manner. The pressure of this type of support work can create severe consequences for those taking on this heavy labor (Lynch 2019a).

Demographical Impact on RA Burnout. Another challenge that leads to the persistence of burnout in the RA role is the varying lived experiences that can be held by RAs of differing demographics. These differing experiences can make for unequal mental demands. For example, a study by Cousineau and Chambers (2015) found that RAs who identified as female were more likely to be tasked, formally and informally, with handling situations that required them to act as mediators. The male-identifying counterparts of the study reflected that they were more likely to be called to handle situations that required an authoritarian actor, such as policy violations. Identifying factors beyond gender can also contribute to these unequal pressures. For example, RAs who identify as being more extroverted may report higher degrees of self-efficacy than introverted RAs (Deluga & Masson, 2000). This higher degree of self-efficacy could lead to increased feelings of mattering, which could lead to a reduced vulnerability to burnout. Additionally, A study by Hardy and Dodd (1998) explored the idea that the demographics of the floor an RA serves on also affects the level of stress and pressure an RA is under. The study found that RAs who served on floors that were made up of primarily first-year students experienced lower levels of personal accomplishment and higher levels of emotional exhaustion when compared to RAs who served on floors that primarily housed upperclassmen (Hardy & Dodd, 1998). This greater level of emotional fatigue could lead to a higher risk of reaching

burnout. Furthermore, RAs who hold marginalized identities are more at risk for burnout in their position due to the racism and microaggressions they may encounter on top of their daily RA responsibilities (Harper et al., 2011). A study by Harper et al., (2011) of Black male RAs at predominantly white institutions found that these students had to combat racial stereotyping from not just their colleagues and residents, but also from their supervisors. Additionally, these RAs navigate feelings of loneliness when having to navigate the racially politicized space of their residence hall (Harper et al., 2011). Having to navigate these challenges in addition to the challenges presented by the RA role places these student leaders at a greater risk for burnout (Harper et al., 2011)

Effect on RAs and Residents.

The factors of role ambiguity, compassion fatigue, and job severity serve as tenants of burnout in the RA role. This burnout impacts the RA as a student leader and in turn impacts the residents that they serve. The 24-hour nature of the role combined with the pertinent demands it places on RAs causes these RAs to struggle academically. A student in the RA role may be challenged when balancing their coursework and RA duties (Bubbers, 2016). This complex balancing act can lead to advanced stress and burnout if the RA becomes overwhelmed with all they must accomplish as a developing student (Bubbers, 2016). While most RAs understand that their coursework and classes must be their top priority as a student, academics are often be pushed to the side in favor of RA responsibilities (Bliming, 2003). The RA role is all consuming (Bliming, 2003). Pressured to fulfill their role exceptionally and serve their residents with intentional care, RAs often neglect their own needs (Bliming, 2003). In addition to having an impact on the RA's academics, burnout in the RA role impacts an RA's social and support systems. In a study by Bubbers (2016), participants expressed that the RA role has negatively

impacted their ability to make and maintain friendships and other relationships. Support systems play a critical role in a successful transition according to Schlossberg's iteration of transition theory. Therefore, this inability to maintain friendships could impact a student's ability to successfully transition into the RA role.

Burnout in the RA role is a critical issue because it does not just impact college students in the RA role, but also college students who require the RA role to be successful in college. An RA who can comfortably interact with their residents can enrich the overall quality of life for students in residence halls (Deluga & Masson, 2000). RAs are critical in promoting holistic student success (Renn, 2020). Particularly, RAs as a peer resource promote success particularly in first-generation, low-income students who may need aid in overcoming systemic institutional barriers (Renn, 2020). Dimensions of burnout like depersonalization can cause employees to distance themselves from those who receive their care (Stoner, 2017). This depersonalization can also cause a person in a caregiving role to give impersonal responses to those they are providing care to (Stoner, 2017). Given the social nature of the RA role and the sensitive situations they are tasked to handle, approachability and care are critical attributes of RAs. If burnout causes an RA to treat residents impersonally, residents may not feel comfortable disclosing issues to that RA or asking for their help. If experiencing strong enough burnout, an RA may even vacate their position. This would also prevent them from being able to give care to their residents. RA burnout is a critical issue because it impacts an RA's ability to provide vital care and resource referral to college developing college students.

Alternative Perspectives to RA Burnout.

A study by Bubbers (2016) found that RAs identified that their role was a responsibility worth taking on because it provided transferrable skills. RAs surveyed in the study indicated that

the skills they were gaining from the role were ones that applied to their future beyond college (Bubbers, 2016). Because of this, institutions may choose to view stress in the RA role through a functionalist lens. Functionalism interprets the various systems we participate as preparation for survival in society (Feinberg & Soltis, 2009). In this lens, student affairs practitioners may see an RA's practice in navigating factors of burnout as a learned skill that would benefit RAs and prepare them to navigate stress in their post-college lives. However, this perspective can be negated by the presence of a strong, mental health-centered RA training. Critics of the functionalist perspective view it as a potential weapon that could provide an "unwarranted justification for the institutions and practices of modern society" (Feinberg & Soltis, 2009, p.36). A weakness of this perspective is that this stress that a functionalist view may deem as productive preparation is harmful to the RA and their residents and is therefore unproductive. As previously stated, the high stress of the RA job does not just affect the RA's mental health, but also their academic performance and ability to fulfil their responsibilities to their residents (Bubbers, 2016). A less harmful way to prepare RAs to navigate high-stress responsibilities and environments would be through thorough training on role ambiguity, compassion fatigue, and navigating intense responsibilities (Hardy & Dodd 1998).

Interrogating the issue

Reforming RA Training. As noted above, RA training has room for reform. This reform could help prevent burnout in the RA position before RAs even meet their first resident. One aspect of RA training that could be bolstered is the referral skills that can be developed to connect residents to campus mental health resources (Taub & Servaty-Seib, 2011). If the RA can make an effective referral early-on, this will prevent them from being more exposed to that resident's trauma throughout the year. RAs can only make these successful referrals if they are

trained to understand the signs of a struggling residents and are trained in making effective referrals to professional staff members or institutional counseling services (Taub & Servaty-Seib, 2011). This bolstered training would not just benefit the residents connected to professional services, but also benefit the RA's own mental health (Taub & Servaty-Seib, 2011). In an article by Taub & Servaty-Seib (2011), it was noted that RAs who were trained before beginning their role reported experiencing less stress than RAs who did not. These RAs also noted improvement in knowledge and job performance, attributes that could lead to decreased role ambiguity and increased sense of self-efficacy (Taub & Servaty-Seib, 2011). Additionally, training specifically focused on stress management could help prevent RA burnout. Training regarding stress management would be most helpful if provided before the RA assumes their duties rather than alongside their on-the-job experiences (Hardy & Dodd, 1998). A study by Hardy & Dodd (1998) noted that institutions of higher education do not adequately focus on coping strategies and stress-reduction during RA training. If introduced early-on in the RA's career, a strengthened mental health-centered training would work to prevent the issue of RA burnout.

Mandating Counseling Connections. Another potential avenue for burnout mitigation in the RA role is that of providing counseling services specifically designed to work with RAs. If RAs are being tasked with engaging in trauma support, they too must be supported to take on this load. Additionally, if RAs are being tasked with such heavy responsibility as trauma response, they should be provided or mandated at least a screening by a counselor (Lynch, 2019b). These meetings with a counselor could address this issue in several ways. For one, providing a resource of regular support conversations may increase RAs' perceived support from SAPs in residence life (Lynch, 2019b). This feeling of support would help reduce role ambiguity in this role because RAs would have a trusted resource they could depend on when navigating the

compassion-based elements of their roles. Furthermore, having RAs engage in conversations with a professional counselor around the presence of secondary trauma would help normalize this issue and in turn help RAs overcome it (Lynch, 2019b). These meetings with professional staff members who are specifically trained to understand the RA role and the roles it encompasses could be viewed as a behavioral intervention for RAs. Behavioral interventions that aid RAs in reflecting on their self-care and articulating their progress would help institutions of higher education monitor the issue of RA burnout, making it easier for them to intervene (McLaughlin, 2018).

Shifting Caseloads. Lastly, another potential strategy for mitigating RA burnout could be institutions considering the utilization of an on-call counselor or social worker to address the high-intensity mental health crises otherwise left to be addressed by RAs. The caseload for what RAs must handle needs to be revised (Lynch, 2019b). One way to adjust this caseload would be to shift some of the more intense responsibilities off student staff and onto a professionally trained counselor or social worker to lessen the exposure that RAs have to secondary traumatic stress. In 2017, the University of Iowa added an embedded counselor role to residence halls in addition to developing a counselor-led support group for RAs (Korn, 2017). In a study by the Wall Street Journal, 14% of 463 surveyed university counseling centers indicated that they had developed embedded or counselor-in-residence roles to their institutions (Korn, 2017).

Organizational additions like on-call or embedded counselors would take some of the high-pressure responsibilities off of the RA's caseload, decreasing their exposure to compassion fatigue-inducing student trauma and placing the weight of the "first responder" title onto educated and professionally trained staff members (Paylo et al., 2017). Additionally, shifting high-risk mental health-based responsibility away from RAs would alleviate some of the

pressure that comes with being identified as an agent acting on behalf of the institution, furthermore the pressures that come with potentially putting an institution at risk for legal concerns if properly referrals to professional services are not made (Paylo et al., 2017)

Summary

Students who serve as RAs on college campuses are vulnerable to burnout due to the nature of their role. Schlossburg's iteration of mattering and marginality addresses a need for individuals to understand that they matter to others (Patton et al., 2016). RAs struggle to find a feeling of mattering due to their inability to see their long-term impact on their residents (Stoner, 2016). Schlossburg's iteration of transition theory examines how significant changes in one's life can impact them (Patton et al., 2016). Through this lens, the transition from being a college student to being an RA is significant and can cause significant stress if proper support systems are not present. Resident assistants play critical roles as the front-line responders for college student care in residence halls (Stoner, 2016). This role has been made increasingly complex and weighty due to shifts in public policy (Boone et al., 2016). The role of the RA now tasks students with balancing a wide variety of often conflicting roles (Bliming, 2003). This role ambiguity impacts an RA's understanding of their role and their perceived relationships with residents, which can lead to heightened stress (Bubbers, 2016). Additionally, due to the heavy nature of the situations RAs are tasked to respond to, they are vulnerable to compassion fatigue (Lynch, 2019b). Additionally, the high pressure due to the severity of their responsibilities leads to high stress for students who serve as RAs (Owens, 2011). The combination of role ambiguity, compassion fatigue, and job severity lead to RAs to experience burnout. While student affairs practitioners may view this stress as preparation for living in a stressful world, there are other ways to aid in this preparation beyond having RAs face harm, like strong RA training (Feinberg

& Soltis, 2009; Hardy & Dodd 1998). This is a critical issue for institutions of higher education because RAs serve as critical resources for student success (Renn, 2020). If left unaddressed, this vulnerability to burnout will place these vital student leaders in a state where they cannot aid the students that they are called to serve.

Conclusion

As mental health issues continue to become a growing issue for college students, the role of the RA as a resource for aid in referral can grow more important (Hibbs & Rostain, 2019; Stoner, 2017). If institutions of higher education are to continue to rely on student leaders to serve on the front lines of student care, they must be attentive to the aspects of the RA role that are prone to burnout. The 24-hour nature of the role combined with the high-stress situations RAs are tasked with navigating creates high-stress work environments for RAs that could potentially impact their academics or their ability to remain in their position (Stoner, 2017). Additionally, this high degree of burnout can prevent RAs from being able to give care to their students who could severely need it to thrive, or even survive, in college. Because of this, it is imperative that student affairs professionals take intentional and informed steps to prevent and mitigate this burnout. In doing so, student affairs professionals can help ensure that RAs can remain valuable resources for students living in residence halls. The following chapter will provide an overview of potential steps that professionals in residence life capacities can take to prevent and interrogate the presence of burnout caused by the RA position.

Chapter Three: Project Description

Introduction

Student Affairs Professionals (SAPs) need to take intentional action if they are to prevent and or mitigate the risk of burnout associated with serving in the resident assistant (RA) role. To center burnout prevention as a departmental priority, departments of housing and residence life must implement intervention measures before and during an RA's tenure in their role. Specifically, SAPs should consider the common factors of role ambiguity, compassion fatigue, and job severity that combine to place RAs in a position vulnerable to high stress and eventually burnout. If SAPs take an active role in shifting the training and position responsibilities to combat these conditions, they will reduce the presence of burnout in the RA role.

The purpose of this project is to recommend potential strategies for SAPs to consider when addressing burnout in the RA position. To do this, this project prescribes three potential action steps. First, a bolstered RA training that focuses on mental health, coping strategies, and referral practices will provide a transparent preparation for RAs about to enter their role. Having this training required yearly will also serve as a reinforcement for returning RAs as well. Second, institutions should consider developing a counseling resource that is designed to serve as a support service for RAs. Finally, departments of housing and residence life should consider utilizing an on-call counselor or social worker to shift heavier mental health-based interventions away from the RAs' caseloads. While the role responsibilities of the RA can be generalized across institutions, it is important to know that the role holds a different context at each institution. Therefore, these action steps are written intentionally broad to be adapted to the unique circumstances of the institution implementing them.

In this chapter each component of the project is addressed and outlined. First, elements of a mental-health centered training are explored. Second, the addition of a counseling support

service for RAs is described. Finally, the creation of an on-call counselor or social worker is be outlined. This project covers the goals of each of these intervention measures, as well as provides a broad overview of how they could be implemented at an institution. Furthermore, this chapter addresses how to evaluate the success of these intervention measures. Finally, plans for implementing this project are stated.

Project Components

Mental Health-Centered Training

The first component of this project is to prescribe a mental health-centered training for RAs to be delivered by departments of housing and residence life alongside appropriate campus partners (see Appendix A). Appendix A outlines what this training will look like and how it will be facilitated. This outline includes the main topics to be discussed that will be adapted to fit the institution utilizing the training. In this outline is suggestions for how to incorporate small-group dialogues and large-group presentations. This training outline also notes recommendations for including returning RAs as facilitators and knowledge holders in this discussion. This training will give a transparent perspective into the potentially stressful role of the RA. While it is important to energize students so they feel excited to take on the position, it is also critical that the potential challenges of the role are acknowledged upfront. This provides a sense of transparency from SAPs and will also validate the issue of stress in the role and therefore potentially reduce the stigma behind seeking out help from a supervisor or additional resources. This training will cover the potential stressors of the role. First, training will address the weight behind the transition of being a typical student to being an RA. It will be acknowledged by SAPs that this is a potentially major transition. Taking on the RA role affects nearly every aspect of the student experience including living environments, social relationships, academics, and potential

outside involvements. This will be an opportunity to utilize returning RAs as mentors who can speak to their own experience transitioning to their first year in the role. When addressing this transition, it is important to inform RAs of the skills that will be required of them to cope with their transition. For example, with the transition of having one's residence hall become their place of work, it is critical that RAs understand the principles of time management of boundary setting, as a lack of these skills could increase the pressure of the 24/7 role. Additionally, training will address the social changes that occur when taking on the RA role. One of the complicated aspects of the position that develops role ambiguity is the idea that the RA must balance the responsibility of a policy enforcer with the compassion of a peer mentor. RAs must understand that this dynamic could impact their ability to develop social support systems, and therefore they must be intentional in developing these support systems – potentially outside of the residence hall.

After addressing the stressors that are associated with transitioning into the RA role, on-the-job stressors will be acknowledged. For example, SAPs should host discussions on how helping residents navigate heavy topics could, if unaddressed, affect the mental health of RAs. When addressing these stressors, it is important to empower RAs with action steps. In a mental health-centered training, these steps will include tips for stress management, boundary setting, referring residents to professional support services, coping with the emotional aspects of the role, and developing open communication with supervisors.

Stress management. In developing training, best practices from returning RAs will be collected, and returning RAs will have an opportunity to share a variety of methods used to control and alleviate stress. It is important to understand that each student may require a unique approach to stress management and coping with emotional situations. RAs will be encouraged to

explore what works best for them but should also be informed on how to ensure these practices are sustainable and safe. Additionally, recommendations on how to balance time commitments will be included to reduce the stress of navigating the RA role.

Boundary setting. The RA role feels like a 24/7 undertaking. To reduce this feeling of nonstop obligation, SAPs will divulge tips on how to set appropriate boundaries with residents. This could include encouraging RAs to utilize their allotted days off or equipping them to communicate with residents when they need time to focus on their studies or self-care. Additionally, SAPs should develop designated communication practices for RAs to use with their residents. For example, SAPs should consider preventing RAs from handing out personal phone numbers and instead encourage the use of email communication. Furthermore, RAs should be encouraged to communicate these boundaries early-on with residents, potentially at their first all-hall or all-floor meeting of the semester.

Referrals to services. Another goal of this training is to remind RAs that they are not alone on the front lines of student care. SAPs should consider inviting campus resources to whom RAs may refer residents to speak at RA training. This will associate faces to services, making these services more approachable and accessible to RAs. In this training, RAs will be taught how to recognize when a situation has risen to a level of concern worthy of referral. RAs will also be reminded of the benefits of referring residents to trained professionals. Making these referrals not only connect residents to services that will help them, but it also prevents RAs from being further exposed to trauma, which could reduce the risk of experiencing compassion fatigue.

Coping strategies. In this training, RAs will be informed of the trauma they may be exposed to when working with college students. Because of this exposure, RAs will also be

equipped with potential coping strategies. Again, this could be an opportunity for returning RAs to share practices that have worked best for them. RAs should be encouraged to seek out and develop supportive social circles. This encouragement may come in the form of SAPs developing staff social events or providing connections to student organizations (in addition to ensuring that RAs have time to engage in these opportunities). Furthermore, this holds another opportunity to connect RAs to campus partners. By having institutional counseling services and recreation center representatives discuss their services at RA training, this creates a sense of service promotion from housing and residence life departments and may motivate an RA to engage in these services.

Open communication. While other elements of this training could occur in a large-group auditorium setting, SAPs should also set aside intentional time to set the stage for a relationship of open communication amongst RAs and supervisors. In this time, supervisors will develop standards for open communication with RAs early-on, providing RAs with a channel to navigate potential concerns and a space for processing what they experience. This expectation and invitation to open communication would prevent the RA from holding in and internalizing what they are experiencing and will also serve as a checkpoint for supervisors to potentially refer RAs to support services.

During or after training, RAs will be provided a handbook that they can refer to throughout the year. This handbook will summarize the key takeaways from the training and organize them in such a way that RAs will easily access these points when applicable. Furthermore, this handbook will provide step-by-step instructions on how to refer residents to support services and provide a guide for how to recognize signs of mental health concerns in residents to intervene early-on.

A reform in this area aims to equip RAs to take ownership of their mental wellness and prevent burnout before stepping into the RA role. Transparent training implemented before the role is assumed will be more preventative and impactful than training that is structured alongside the on-the-job experiences (Hardy & Dodd, 1998). For RAs returning to their role, the introduction of this training will reinforce the supportive stance taken on by housing and residence life departments regarding mental wellness. Role ambiguity occurs when uncertainty arises in a position (Bubbers, 2016). The implementation of a thorough training will provide a transparent view of the RA role, both its benefits and its potential challenges, and will work to actively reduce this uncertainty and reduce the presence of role ambiguity.

Mandated Counseling Connections

The next element of this project is for institutions to provide counseling services that directly support RAs. This could come in the form of designating one counselor from the institution's center to take on caseloads of RAs or could come in the form of hiring a counselor to serve directly out of the housing and residence life department. The goal behind this strategy is to provide RAs with a resource where they can reflect on and process the heavy responsibilities of their role and be prescribed with strategies and counsel for how to navigate those responsibilities in a healthy and sustainable way. This counselor will be trained on the components, responsibilities, and context of the RA role. They will also be a present force outside of counseling sessions, working to develop programs, distribute literature and success tips, and serve as a key decision maker when addressing changes to the RA role. Additionally, this counselor could host support groups for RAs where they could validate one another by sharing how they are navigating the challenges of the role. This will also equip RAs with shared best practices to help them further process their experiences.

Regarding providing counseling services, SAPs should develop requirement that RAs must meet with the designated counselor at least once per semester. Giving routine to this service ensures that RAs are utilizing it and works to remove stigma associated with seeking support services. Additionally, if RAs are left to determine for themselves when they need counseling, they may never deem their struggle worthy of external help. Furthermore, they may then only seek out this service after they have developed burnout rather than utilizing it as a preventative measure. Developing a service like this will allow RAs to discuss their challenges with a professional who is not their direct supervisor, and therefore would work to remove a fear of repercussions for disclosing struggles with the role. This project component works to address compassion fatigue, a common element in burnout. It will give RAs an outlet to dispel the secondary trauma they take on by assistant residents who are navigating trauma. If left to hold onto this secondary trauma, an RA could develop compassion fatigue and be too burnt out to help their residents to their fullest extent. Because of this, it is critical that housing and residence life departments provide RAs a designated space to process and let go of the trauma they are exposed to so that they can avoid burnout and continue to help their residents.

Shifting Caseloads

The final component of this project is for institutions to implement having an on-call counselor or social worker to serve as a responder when RAs encounter situations that are too severe for their level of training and ability. After reviewing the literature, it is clear that the current caseload for RAs must be revised (Lynch 2019b). One area of the role that could be altered is the exposure that RAs have to high-intensity situations. Currently, RAs are tasked to navigate intense situations around mental health, Title IX, and suicidal ideation (Owens, 2011). By having a student leader serve as the primary responder to these crises, institutions are putting

themselves is a risky position where an RA could jeopardize the institution legally if they do not follow procedure effectively (Letarte, 2013). By removing that onus and risk away from student leaders and onto trained professionals, RAs, residents, and the institution will be better off. For RAs, they will have less pressure associated with their role. By being able to report a situation up to a designated on-call counselor or social worker, they will take a step away from the stress associated with navigating a high-stress situation. For residents, their crises will be in the hands of someone who is academically and experientially trained to handle their situation rather than a student leader who may not be prepared to handle this crises, or a campus police officer who may intimidate them. For institutions, they place themselves in a less risky situation by entrusting a trained professional to follow legal procedures rather than a student leader.

Logistically, the institution will hire 2-3 designated social workers or counselors to take on a rotating duty roster. Outside of the on-call responsibilities, the new first responders will work in the campus counseling center or serve on the housing and residence life administrative team to provide a new lens to inform housing practices. When an RA is on duty and encounters a situation that they know is too intense for them to handle, such as a student having a panic attack or disclosing suicidal ideations, they will call the on-call responder to come to the residence hall to take over the situation. Appendix B outlines a communication tree that distinguishes when an RA can address a situation themselves and when the RA will need to contact the on-call social worker or counselor. This will in-turn also benefit the residence hall directors or supervisors of the RAs, as the situations where they would be called would then be limited to less-severe, policy or facility-based scenarios, which would also work to prevent burn out at the professional level. Many institutions already have community policing offers who can be contacted for residence hall crises (International Association of Campus Law Enforcement, n.d.). However, for

some students, especially students of color, community policing officers may not be appropriate respondents to mental health crises, and can even escalate the issue (Weissman, 2020). An on-call counselor or social worker will be a more approachable responder who will be adequately trained to navigate the situation.

Additionally, without the pressure of handling severe concerns, RAs will have more time and energy to dedicate to aspects of their role that revolve around community building (Mangan, 2021). RAs could place more focus on handling roommate conflicts, developing programming, and bonding with residents knowing that a trained professional can handle the heavier duties (Mangan, 2021). Implementing an on-call counselor or social worker would help to alleviate the job severity aspect of RA burnout. By removing the more severe responsibilities of the RA role, their job will be less likely to place them vulnerable to burnout.

Project Evaluation

The goal of this project is to reduce the exposure of RAs to conditions that cause burnout like role ambiguity, compassion fatigue, and job severity because of their role. For each component of this project, there are several ways that SAPs will evaluate for effectiveness. Additionally, because this project is intentionally designed for institutions to adapt and tailor it to their departments of housing and residence life, the methods of evaluation can too be adapted to fit the needs of the institution. For evaluating the mental health-centered RA training, a qualitative pre-survey and post-survey will be conducted. The pre-survey will be administered to RAs before the training to determine the RA's current understanding of stress management in the RA role. A separate survey will be administered for new RAs and RAs returning to their position. The survey for new RAs will assess how they perceive the transition into the RA role will affect them, whereas the survey for returning RAs will assess how their previous experiences has

impacted them. Examples of pre-training surveys for both new and returning RAs are found in Appendix C and D. After the training, a post survey will be administered to assess if RAs can articulate the concepts that they have been taught. Students will again take different surveys depending on if they are new or returning to the role. Examples of these surveys are found in Appendix E and F. Furthermore, a third survey will be administered at the end of the first semester. This survey will have RAs reflect on their lived experience in the role and articulate if they are using concepts taught to them in the training. Examples of these surveys are found in Appendix G and H. These assessments will be reviewed to assess the effectiveness of the training and serve to inform future trainings and in-services. For assessing the effectiveness of the implementation of the RA-centered counselor, surveys and or focus groups could also be used. These surveys could ask qualitative questions that could work to assess if RAs can articulate benefits and meanings behind their interactions with the counselor. An example of this survey is found in Appendix I. These surveys could also work to see if there are any other potential programming opportunities (more specialized support groups, physical wellness sessions, art therapy sessions, etc.) that RAs feel would further support them.

Whereas the RA training and required counseling sessions are project components that can be anticipated, the usage of the on-call social worker or counselor are determined on the crises that RAs come across and are therefore unpredictable. This unpredictability makes it challenging to assess. One way that SAPs could navigate evaluating the impact of the on-call social worker or counselor on reducing job severity could be to conduct structured conversations with returning RAs. These RAs could be asked to reflect on their perceptions of calling up to the on-call social worker or counselor compared to previous years where they did not have this option. Furthermore, these returning RAs could be asked to reflect on how they perceive their

emotional caseload before and after the implementation of the on-call social worker or counselor. These conversations would be valuable to see if the implementation of such a resource fulfills the goal of creating a less daunting role for RAs.

Project Conclusions

RAs are critical resources for institutions of higher education, and the practice of serving as an RA has rewarding impacts (Stoner, 2016; Cholodunik, 2003). The presence of role ambiguity, compassion fatigue, and the severity of the job all leave the RA in a position vulnerable to mental health burnout (Bubbers, 2016; Lynch, 2019b; Owens, 2011). Schlossburg's iteration of transition theory illustrates how entering the RA role can have a severe impact on a student who is not equipped to handle such a transition (Goodman, Schlossberg, & Anderson, 2006). Additionally, Schlossburg's iteration of mattering and marginality shows how critical it is that SAPs make an intentional effort to provide mental health-centered resources to RAs to show them that they recognize their challenges and want to support them (Patton, 2016). This project aims to help SAPs in that effort by providing three action steps: bolstering a mental health-centered RA training, providing RAs with intentional counseling services, and installing an on-call social worker or counselor to respond to severe mental health crises.

When RAs navigate their position, they do so with uncertainty (Bubbers, 2016). This role ambiguity is due to the conflicting and complex responsibilities associated with the role that have been made further complex due to changing federal policies and national events (Bubbers, 2016; Boone et al., 2016). This ambiguity also comes from the personal nature of the RA role, where developing students are tasked with being policy enforcers and mentors for other developing students (Everett & Loftus, 2011). Through adding a mental health-centered training that outlines and makes transparent the stressors of the RA role while equipping RAs to set healthy boundaries with their residents, this project will reduce the uncertainty in the RA role.

The emotional nature of the RA role can create its own genre of exhaustion. Students navigate college while also navigating a variety of traumas (Lynch, 2019b). When RAs are asked to aid residents in addressing these traumas, they put themselves at risk for secondary trauma and compassion fatigue (Lynch, 2019b). By providing RAs a structured resource to process this obligation, SAPs are in turn providing a way for RAs to overcome the presence of secondary trauma (Lynch, 2019). With Generation Z coming into college with a greater presence of mental health concerns, the need for effective RAs will also become greater (Seemiller & Grace, 2016). By investing resources into the mental care of RAs, SAPs will work to ensure that residents will be provided RAs who have the capacity to help them navigate college effectively.

The tasks assigned to RAs are heavy. The ever-growing list of responsibilities they hold includes navigating federal policies like Title IX and serving as first responders to resident crises (Letarte, 2013; Boone et al., 2016). Taking on these responsibilities is not just a risky practice for RAs, but also the institutions held liable for improper policy implementation (Letarte, 2013). By shifting the more intense caseloads away from the RA and onto trained on-call social workers or counselors, both RAs and institutions will have improved peace of mind. This shifting of responsibilities will make certain that the crises of residents will be professionally addressed while freeing up mental capacity for RAs to continue to further serve in a peer mentorship role.

RAs are immeasurably important for students in residential housing. However, RAs cannot serve their residents to the best of their ability if they are suffering from burnout. Active intervention by SAPs will allow RAs to better prepare for their role, better process their role, and overall, better serve in their role. By recognizing and interrogating the factors of burnout present in the RA role, this project aims to help prevent the presence of burnout in these critical student leaders. The ability to serve as an RA is an impactful practice that equips RAs with lifelong

skills, lifelong connections, and lifelong memories. They should be able to experience this vital practice without putting their mental health at risk.

Plans for Implementation

These prescribed action items were intentionally written in a general fashion to be adapted to any institution's department of housing and residence life. There are currently no plans to implement this project at a specific institution of higher education because of this. This project is to serve as a guide for SAPs looking to understand and prevent the presence of burnout in the RA position. If implementing this project, SAPs must first determine where role ambiguity, compassion fatigue, and job severity is present in their current housing and residence life practices. After analyzing the presence of these factors, SAPs must assess which elements of this project they would be able to implement with their current resources. Elements that should be taken into consideration include but are not limited to financial capital, professional staff capacity, and designated time allotted for RA training.

After implementing components of this project, SAPs must constantly be assessing and pivoting these perceived practices to meet the changing needs of RAs and their residents. For example, in assessing the effectiveness of the RA-centered counseling sessions, SAPs may uncover additional topics to be covered in RA training. Furthermore, SAPs may find that their mental health-centered training could be offered in increments throughout the year or even implemented in a way before students even apply for the position. The adaptable and customizable nature of this project makes it sustainable and applicable to a variety of institutions.

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Appendix A

Agenda for Mental Health Unit of RA Training

Transitioning into the RA role

1. Break new RAs into several small groups led by returning RAs.
2. Pose the following questions for group discussion:
 - a. How do you anticipate the RA role impacting...?
 - i. Your schedule?
 - ii. Your academics?
 - iii. Your social circles?
 - iv. Your self-care?
 - v. Your student organizations/jobs/service obligations?
 - b. How much time do you anticipate spending on elements of the RA role?
 - c. What are you most excited about when taking on the RA role?
 - d. What are you most nervous about when taking on the RA role?
 - e. What aspects of your life do you think will be most impacted by the RA role?
 - f. What skills or abilities do you think you will need to develop to succeed in this role?
3. Have the returning RAs reflect on their own answers to these questions when they were entering the role and share insight on the realities of the position.
4. Bring the groups back together to present on transitioning into the RA role.

Stressors on the job

1. Present on where stress may occur in the following areas:
 - a. Managing a student schedule while managing an RA schedule
 - b. Working on a team (that you live with)
 - c. Living where you work
 - d. Fostering connections with residents while upholding policy
 - e. Balancing relationships outside of the RA role
 - f. Navigating policies and administrative procedures
 - g. Responding to crises

Stress management practices

1. Present on encouraged practices for stress management.
 - a. Using campus resources
 - i. Counseling center
 - ii. Recreation center
 - iii. Office of Student Life
 - iv. Academic advising
 - v. Student success resources
 - b. Engaging in wellness
 - i. Mind fullness practices
 - ii. Scheduling self-care
 - iii. Connecting with support systems
 - iv. Engaging in physical activity or exercise

- v. *Taking time-off*
- 2. *After presenting, again break out into several small groups led by returning RAs.*
- 3. *Have returning RAs discuss their personal best practices for how they practice stress management.*
 - a. *Note: prepare returning RAs to come to this training prepared to lead these discussions. Ensure that returning RAs are taking these opportunities seriously and are facilitating appropriately.*

Boundary setting skills

- 1. *Present on strategies for setting boundaries.*
 - a. *Establishing appropriate methods of communication with residents*
 - b. *Establishing a structure for being on-duty*
 - c. *Encouraging RAs to use all of their allotted days for time-off.*
 - d. *Understanding when to pass a situation up to a supervisor.*

Making informed referrals

- 1. *Present on systems for referring residents to supervisors.*
 - a. *How can RAs know a situation is too big for them to handle?*
 - b. *How will RAs determine what to report to whom?*
 - c. *What are the processes for making a referral?*
 - d. *How can RAs disseminate the referral process to residents?*

Coping with heavy interactions

- 1. *Present on coping methods for the emotional stress of the job.*
 - a. *Using the designated counselor once a semester*
 - i. *What should/could be discussed in those meetings?*
 - ii. *How can you prepare for and most effectively engage in those meetings?*
 - b. *What are you able to discuss with your peers/RA team?*
 - c. *What are you able to discuss with your supervisor?*
 - d. *How can you step away from a difficult situation?*
 - e. *What tools can you use to cope with heavy interactions?*
 - i. *Journaling*
 - ii. *Going on walks*
 - iii. *Spending time with support systems*
 - iv. *Taking time off*

Communicating with your supervisor

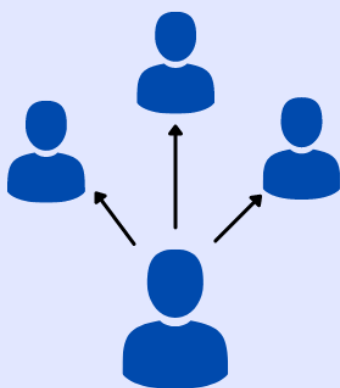
- 1. *Present on effective methods for communicating with your supervisor.*
 - a. *Being open about your strengths and weaknesses.*
 - b. *Articulating early expectations and what is needed from supervisors.*
 - c. *Articulating what practices make you feel valued/heard/supported?*
 - d. *Articulating how you show up in times of stress?*
 - e. *Articulating how you handle stress.*
 - f. *Understanding the supervisor as a mandatory reporter*
- 2. *After training, supervisors will meet with RAs individually to establish weekly one-on-one times and develop communication.*

Appendix B

Residence Life Communication Tree

Residence Life Communication Tree

As a Resident Assistant, utilize this chart to understand which concerns you can address yourself, and to whom certain concerns should be reported.



**If you feel the concern is greater than a stand-alone incident, contact the social worker on-call*

***Alcohol violations must be confronted with a second Resident Assistant*

RESIDENT ASSISTANT

- Roommate conflicts
- Facility concerns
- Room lockouts
- Homesickness*
- Alcohol violations**
- Resource connections
- Quiet-hour violations
- Academic concerns
- Low-level anxiety*

RESIDENCE HALL DIRECTOR

- Severe resident intoxication
- Overwhelming alcohol violations
- Missing keys
- Urgent facilities damage

SOCIAL WORKER ON-CALL

- Suicidal ideations
- Panic attacks
- Disordered eating
- Title IX violations
- Severe mental health concerns
- Self-harm disclosures
- Escalating conflicts

CAMPUS POLICE

- Drug/Marijuana usage
- Potential hospitalizations
- Missing persons
- Active shooter/campus lockdown
- Fire emergency

Appendix C

RA Training Pre-Training Survey (New RAs)

RA Training Pre-Training Survey (New RAs)

The purpose of this survey is to assess your current understanding of stress management in the Resident Assistant Role. Your results will remain anonymous and will be used to assess the effectiveness of this year's RA training.

* Required

- 1. How many hours per week do you anticipate spending on RA-related work (please indicate specifics. Ex: 2 hours in staff meetings, 1 hour planning programs, etc) *

- 2. How are you anticipating that transitioning into the RA role will impact you academically? *

- 3. How are you anticipating that transitioning into the RA role will impact you socially? *

4. How are you anticipating that transitioning into the RA role will impact your mental well-being? *

5. How do you plan on managing your stress when taking on this role? *

6. What campus resources do you anticipate utilizing to succeed in this role? *

7. What do you anticipate being your biggest stressor(s) in this role? *

8. What are you most excited about regarding this new role? *

Knowledge Assessment

The following assessment questions will ask you to measure your current knowledge on the following topics and skills. Please rate your current knowledge using the Likert scale. (1= No knowledge, 5= Highly knowledgeable)

9. Managing stress *

Mark only one oval.

	1	2	3	4	5	
No knowledge	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Highly knowledgeable

10. Balancing academics and the RA role *

Mark only one oval.

	1	2	3	4	5	
No knowledge	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Highly knowledgeable

11. Balancing a social life and the RA role *

Mark only one oval.

	1	2	3	4	5	
No knowledge	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Highly knowledgeable

Appendix D

RA Training Pre-Training Survey (Returning RAs)

RA Training Pre-Training Survey (Returning RAs)

The purpose of this survey is to assess your current understanding of stress management in the Resident Assistant Role. Your results will remain anonymous and will be used to assess the effectiveness of this year's RA training.

* Required

- 1. How many hours per week do you anticipate spending on RA-related work (please indicate specifics. Ex: 2 hours in staff meetings, 1 hour planning programs, etc) *

- 2. How did transitioning into the RA role will impact you academically? *

- 3. How did transitioning into the RA role will impact you socially? *

4. How did transitioning into the RA role will impact your mental well-being? *

5. How do you plan on managing your stress when continuing in this role? *

6. What campus resources do you anticipate utilizing to succeed in this role? *

7. What do you anticipate being your biggest stressor(s) in this role this year? *

Appendix E

RA Training Post-Training Survey (New RAs)

RA Training Post-Training Survey (New RAs)

The purpose of this survey is to assess your current understanding of stress management in the Resident Assistant Role after receiving training on stress management and mental health. Your results will remain anonymous and will be used to assess the effectiveness of this year's RA training.

* Required

1. How many hours per week do you anticipate spending on RA-related work (please indicate specifics. Ex: 2 hours in staff meetings, 1 hour planning programs, etc) *

2. How are you anticipating that transitioning into the RA role will impact you academically? *

3. How are you anticipating that transitioning into the RA role will impact you socially? *

4. How are you anticipating that transitioning into the RA role will impact your mental well-being? *

5. How do you plan on managing your stress when taking on this role? *

6. What campus resources do you anticipate utilizing to succeed in this role? *

Appendix F

RA Training Post-Training Survey (Returning RAs)

RA Training Post-Training Survey (Returning RAs)

The purpose of this survey is to assess your current understanding of stress management in the Resident Assistant Role after receiving training on stress management and mental health. Your results will remain anonymous and will be used to assess the effectiveness of this year's RA training.

* Required

1. How many hours per week do you anticipate spending on RA-related work (please indicate specifics. Ex: 2 hours in staff meetings, 1 hour planning programs, etc) *

2. How did transitioning into the RA role will impact you academically? *

3. How did transitioning into the RA role will impact you socially? *

4. How did transitioning into the RA role will impact your mental well-being? *

5. How do you plan on managing your stress when continuing in this role? *

6. What campus resources do you anticipate utilizing to succeed in this role? *

7. What do you anticipate being your biggest stressor(s) in this role this year? *

8. What are you most excited about regarding continuing in this role? *

Knowledge Assessment

The following assessment questions will ask you to measure your current knowledge on the following topics and skills. Please rate your current knowledge using the Likert scale. (1= No knowledge, 5= Highly knowledgeable)

9. Managing stress *

Mark only one oval.

	1	2	3	4	5	
No knowledge	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Highly knowledgeable

10. Balancing academics and the RA role *

Mark only one oval.

	1	2	3	4	5	
No knowledge	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Highly knowledgeable

11. Balancing a social life and the RA role *

Mark only one oval.

	1	2	3	4	5	
No knowledge	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Highly knowledgeable

Appendix G

RA Training End of Semester Survey (New RAs)

RA End-of-Semester Survey (New RAs)

The purpose of this survey is to assess your current understanding of stress management in the Resident Assistant Role after receiving training on stress management and mental health and completing the Fall 20__ Semester. Your results will remain anonymous and will be used to assess the effectiveness of this year's RA training.

* Required

1. How many hours per week do you spend on RA-related work (please indicate specifics. Ex: 2 hours in staff meetings, 1 hour planning programs, etc) *

2. How does serving in the RA role impact you academically? *

3. How does serving in the RA role impact you socially? *

4. How does serving in the RA role impact your mental well-being? *

5. How do you manage your stress in this role? *

6. What campus resources do you anticipate utilize in this role? *

7. What has been your biggest stressor(s) in this role this year? *

8. What has been your favorite aspect of this role? *

Confidence Assessment

The following assessment questions will ask you to measure your current confidence in the following topics and skills. Please rate your current confidence using the Likert scale. (1= No knowledge, 5= Highly knowledgeable)

9. Managing stress *

Mark only one oval.

	1	2	3	4	5	
No confidence	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Highly confident

10. Balancing academics and the RA role *

Mark only one oval.

	1	2	3	4	5	
No confidence	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Highly confident

11. Balancing a social life and the RA role *

Mark only one oval.

	1	2	3	4	5	
No confidence	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Highly confident

12. Setting boundaries with residents *

Mark only one oval.

	1	2	3	4	5	
No confidence	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Highly confident

13. Referring residents to supervisors or support services *

Mark only one oval.

	1	2	3	4	5	
No confidence	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Highly confident

14. Coping with heavy interactions *

Mark only one oval.

	1	2	3	4	5	
No confidence	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Highly confident

15. Communicating with your supervisor *

Mark only one oval.

	1	2	3	4	5	
No confidence	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Highly confident

Appendix H

RA Training End of Semester Survey (Returning RAs)

RA End-of-Semester Survey (Returning RAs)

The purpose of this survey is to assess your current understanding of stress management in the Resident Assistant Role after receiving training on stress management and mental health and completing the Fall 20__ Semester. Your results will remain anonymous and will be used to assess the effectiveness of this year's RA training.

* Required

1. How many hours per week do you spend on RA-related work (please indicate specifics. Ex: 2 hours in staff meetings, 1 hour planning programs, etc) *

2. How does serving in the RA role impact you academically? *

3. How does serving in the RA role impact you socially? *

4. How does serving in the RA role impact your mental well-being? *

5. How do you manage your stress in this role? *

6. What campus resources do you anticipate utilize in this role? *

7. What has been your biggest stressor(s) in this role this year? *

8. What has been your favorite aspect of this role? *

Confidence Assessment

The following assessment questions will ask you to measure your current confidence in the following topics and skills. Please rate your current confidence using the Likert scale. (1= No knowledge, 5= Highly knowledgeable)

9. Managing stress *

Mark only one oval.

1	2	3	4	5	
No confidence	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Highly confident

10. Balancing academics and the RA role *

Mark only one oval.

1	2	3	4	5	
No confidence	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Highly confident

11. Balancing a social life and the RA role *

Mark only one oval.

1	2	3	4	5	
No confidence	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Highly confident

12. Setting boundaries with residents *

Mark only one oval.

	1	2	3	4	5	
No confidence	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Highly confident

13. Referring residents to supervisors or support services *

Mark only one oval.

	1	2	3	4	5	
No confidence	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Highly confident

14. Coping with heavy interactions *

Mark only one oval.

	1	2	3	4	5	
No confidence	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Highly confident

15. Communicating with your supervisor *

Mark only one oval.

	1	2	3	4	5	
No confidence	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Highly confident

Appendix I

RA Support Personnel Survey

RA Support Personnel Survey

The purpose of this survey is to gain your perspective on the use of the New Resident Assistant support personnel. Your results will remain anonymous and will be used to assess the effectiveness of this resource

* Required

1. What about meeting with the Resident Assistant support personnel was helpful to you? *

2. Was there anything unhelpful when using the Resident Assistant support personnel? *

3. How do you feel that meeting with the Resident Assistant support personnel benefits your mental well-being? *

4. If meeting with the Resident Assistant support personnel was NOT mandatory, would you still opt for meetings? *

5. Are there any additional resources or programs that you would like to see from the Resident Assistant support personnel? (If so, please provide examples) *

GRAND VALLEY STATE UNIVERSITY
ED 693/695 Data Form

NAME: Caroline Murray

MAJOR: (Choose only 1)

- | | | |
|---|---|--|
| <input checked="" type="radio"/> Adult & Higher Education | <input type="radio"/> Educational Differentiation | <input type="radio"/> Library Media |
| <input type="radio"/> Advanced Content Specialization | <input type="radio"/> Education Leadership | <input type="radio"/> Middle Level Education |
| <input type="radio"/> Cognitive Impairment | <input type="radio"/> Educational Technology | <input type="radio"/> Reading |
| <input type="radio"/> College Student Affairs Leadership | <input type="radio"/> Elementary Education | <input type="radio"/> School Counseling |
| <input type="radio"/> Early Childhood Education | <input type="radio"/> Emotional Impairment | <input type="radio"/> Secondary Level Education |
| <input type="radio"/> Early Childhood Developmental Delay | <input type="radio"/> Learning Disabilities | <input type="radio"/> Special Education Administration |
| <input type="radio"/> TESOL | | |

TITLE: Assessing and Preventing the Risk of Burnout in the Resident Assistant Position

PAPER TYPE: (Choose only 1)

SEM/YR COMPLETED: Winter 2021

- Project
 Thesis

SUPERVISOR'S SIGNATURE OF APPROVAL *Reginald A. Blockett*

Using key words or phrases, choose several ERIC descriptors (5 - 7 minimum) to describe the contents of your project. ERIC descriptors can be found online at:

<http://eric.ed.gov/?ti=all>

- | | |
|-----------------------|-----|
| 1. resident assistant | 6. |
| 2. burnout | 7. |
| 3. role ambiguity | 8. |
| 4. compassion fatigue | 9. |
| 5. student affairs | 10. |