

THE RD IS (NOT) WELL: A MULTI-SITE CASE STUDY EXPLORING RESIDENCE LIFE  
LIVE-IN STAFF WELL-BEING

by

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(Under the Direction of Laura A. Dean)

ABSTRACT

This case study explored how departments of residence life support a culture of well-being for the live-in, professional staff who serve in the capacity of resident directors. This multi-site case study used the bureaucratic, organized anarchy, and spiritual organizational development frames by Kathleen Manning (2017) to structure the study and analyze the data. The World Health Organization's (1958) definition of health was used to interpret how resident director's mental, physical, and social well-being is affected by their unique role on a college campus. Twelve individuals across three sites were interviewed as a part of this case study. Participants included directors of residence life, an assistant director, and resident directors. Three attributes that positively affect staff well-being are having genuine, positive relationships with colleagues; a comprehensive compensation package; and a passion for working with students. Two attributes that negatively affect well-being are the demands of serving on-call and lack of understanding by campus partners of the role of a resident director. Implications for practice include reconceptualizing the role of the resident director, reconsidering recruitment practices, telling the story of resident directors, and forming intentional relationships with staff that go beyond a collegial perspective. Recommendations for research include examining the

purpose and role of resident directors, collaboration across silos on a college campus, and the impact that living in a residence hall has on staff of color.

INDEX WORDS: residence life, live-in, position, on-call, well-being, organizational development, campus partners, physical health, social health, mental health

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## DEDICATION

This work is dedicated to live-in housing professionals everywhere. Your experience is one of a kind, that few people outside of the field fully understand, making this research even more important.

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## CHAPTER 1

### INTRODUCTION

On November 24, 2019, a member in the “Expatriates of Student Affairs” Facebook Group posted the following:

“Hey everyone, I just wanted to know from you all's perspective: why does housing have so much burn out...? What are things that you all think can be done to make the positions/work environments better?” (Expatriates of Student Affairs, 2019)

Within a week of the original posting, there were eighty-four comments in the thread identifying issues and affirming one another’s ideas. Issues identified included the unspoken expectation of always needing to be “on” for live-on professionals, along with feelings of being overworked when more professionals should be hired or work should be delegated to other functional areas. Other issues shared included feeling a lack of care and support by supervisors, particularly following stressful events, such as attending to students in crisis, and low pay in comparison to the hours worked (Expatriates of Student Affairs, 2019). This social media post demonstrated the recognition that there is a problem worth addressing to improve job satisfaction; responses named specific issues contributing to the problem and hinted at possible solutions.

Burnout is not a new phenomenon among residence life professionals who live-in, but the reasons that contribute to burnout among today’s professionals could differ from the reasons contributing to burnout in previous decades (Guthrie et al., 2005; Herr & Strange, 1985). Burnout, along with organizational culture, supervision quality, role ambiguity, and work overload, is often connected to job dissatisfaction and ultimately rates of attrition (Marshall et

al., 2016; Tull, 2006). Experiencing burnout specifically can negatively impact one's ability to support and care for others (e.g. students), as well as place strain on their personal well-being (Burke et al., 2016). A priority of many residence life departments is to provide students with a safe and comfortable place to live and learn while they are pursuing their collegiate studies (Winston & Anchors, 1993). To achieve this goal, professional staff work to create environments which are conducive to students' personal growth and development. Thus, it is imperative to consider how professional staff well-being is supported on a departmental level, considering student care and support might suffer when staff are burned out.

### **Influence of Personal and Professional Lives on Well-Being**

According to the Centers for Disease Control and Prevention, while “no consensus around a single definition of well-being, there is general agreement that at minimum, well-being includes the presence of positive emotions and moods (e.g., contentment, happiness), the absence of negative emotions (e.g., depression, anxiety), satisfaction with life, fulfillment and positive functioning” (CDC, 2018, para. 3). Using this understanding of well-being, an individual's well-being is influenced by everything in the world occurring around them including the information that they are absorbing through media and other information networks (Kim & Lee, 2011; Kraut et al., 1998). Research often explores the effects of specific environments or actions, such as exercise, home environment, social connections, or work environment, on an individual's well-being (Andrews & Withey, 1976; Csikszentmihalyi, 1991; Diener, 2000; Diener et al., 1999; Frey & Stutzer, 2002; Ryff & Keyes, 1995). Additionally, workplace research further explores the factors that influence healthy versus unhealthy work environments, the impact of the workplace on employee well-being in and outside of work, and how to cultivate a healthy workplace culture that promotes and supports holistic well-being of employees (Grawitch et al.,

2006; Leiter & Cooper, 2017). Notable findings from this research conclude that working more than forty hours a week, working a schedule that is only semi-structured, and having constant problems/crises to address may negatively impact an individual's well-being (Grawitch et al., 2006). As previously alluded to, there is also research that explores aspects of well-being among student affairs professionals, specifically as it pertains to personal and professional life balance (Beeler, 1988; Burke et al., 2016; Cameron, 2011; Guthrie et al., 2005; Wilson et al., 2015).

While the literature relating to well-being among student affairs professionals is important and applicable to this research study, residence life is a unique functional area compared to other functional areas in that many of those in residence life entry-level positions, particularly resident directors, live either in the community they manage or live on campus in another residential community. The reasons behind why these professionals live where they work are further detailed in chapter two, but the primary reason stems from their roles in being both a community builder and serving as a crisis responder to after-hours emergencies involving students living in residence (Kearney, 1993). The role of the resident director is considered an entry-level position; thus, younger professionals tend to hold the role as one of their first full-time professional experiences (Scheuermann & Ellett, 2007; St. Onge et al., 2008). The position of resident director, similar to other entry-level positions within the field of student affairs, generally requires individuals in the position to already have earned a master's degree or currently be pursuing a master's degree in student affairs, higher education, counseling, or related field (Scheuermann & Ellett, 2007; St. Onge et al., 2008).

### **Factors Influencing the Well-Being of Young Professionals in the 21<sup>st</sup> Century**

Considering that resident directors live where they work, it is important to consider how multiple environments (e.g., work, home) intersect and influence the holistic well-being of

individuals operating within. Research has examined attrition of residence life professionals from the field and the impact of burnout (Collins & Hirt, 2006; Herr & Strange, 1985; Palmer et al., 2001). However, the landscape of higher education has changed significantly since much of this literature was published, and there are new factors contributing to the attrition and burnout of live-in professionals that must be addressed. In particular, since the early 2000s, campuses have seen a steady increase in the number of mental health issues such as anxiety, depression, and suicide ideation experienced by students (ACHA, 2019).

Additionally, the rise of social media, and technology in general, has positively and negatively influenced people's well-being. Social media and the use of smart phones, via text messaging and other applications, has allowed people to more easily communicate with individuals in their immediate collegial and social circles, as well as others to whom they may not have as close of a connection (Brown, 2016; Twenge, 2014/2017). These connections have allowed for the sharing of a greater breadth and depth of information and resources (Brown, 2016). At the same time, frequent social media use has been associated with anxiety and depression (Becker et al., 2013; Lin et al., 2016; Primack & Escobar-Viera, 2017). There is also research that indicates social media use influences the psychosocial development of young individuals (Brown, 2016; Primack & Escobar-Viera, 2017; Shapiro & Margolin, 2014).

A steady increase in mental health issues experienced by young adults in the U.S. since the early 2000s and the rise of social media have all influenced today's young professionals as individuals, as well as informed the work of residence life professionals. In the current year, 2021, the realities of COVID have also impacted the work of residence life professionals, causing anxiety and uncertainty about their role responsibilities. Residence life professionals have become "essential employees" for their institutions, coordinating sudden closures in the

spring of 2020, having a role in managing isolation and quarantine housing for students exposed or testing positive for COVID, and serving as public health monitors for student behavior upon returning to campus in Fall 2020.

While there are still elements of the traditional resident director position in existence (e.g., RA supervision, facilitation of programming for residents), today's typical resident director is likely to deal with far more stressful situations on a routine basis. Additionally, it is anecdotally known within the profession that while the resident director position may technically be a forty-hour a week job, there is often an unspoken expectation to work longer hours to meet the demands of the job. These additional hours include serving in an on-call rotation, supporting campus colleagues, and managing the administrative tasks, such as emails, that resident directors are not able to complete during the regular workday as they are responding to more high-level situations as explained above. In other words, elements of the resident director position often negate what researchers deem necessary in work environments to promote well-being.

### **Mental Health on College Campuses**

Since 2000, the American College Health Association (ACHA) has annually distributed an assessment nationwide to better understand college students' behaviors and perceptions of the well-being (ACHA, 2019). The data collected in the past decade shows that the rates of anxiety, depression, and other mental health issues have continually increased, and in comparison to the well-being of previous generations who attended college, are much higher (ACHA, 2019). The most recent assessment distributed in spring 2019 collected data from over 54,000 students at 98 institutions across the United States (ACHA, 2019). ACHA's summary of this assessment indicated that at some point in the previous twelve months, 88% of students felt overwhelmed, 67.4% of students felt lonely, 66.4% of students felt anxious, and 46.2% of students felt so

depressed that they could not function (ACHA, 2019). Despite these large numbers, only a small percentage of these students seek professional help from their campus's counseling centers, so many more institution employees (e.g., student affairs professionals, faculty) are starting to support and help students with these and other mental health issues (Roy, 2018).

Residence life professionals, specifically resident directors, are some of the staff members who find themselves directly supporting students with mental health issues. In part, this is due to the nature of their positions of having responsibilities to respond to situations involving students in need of help after traditional business hours. Resident directors (RDs) also tend to be professionals who help many of the students with mental health needs because the purpose of RDs is to manage the living communities where students reside. In other words, by overseeing the area in which residential students spend a significant amount of time, RDs are likely to be staff members who hold at least some responsibility in supporting students in distress. Additionally, as the RD position is typically seen as an entry-level position, many individuals who hold this role tend to be in their twenties and are recent college graduates. Developmentally, these individuals may still be affected by many of the same issues that current undergraduate students, who are not too much younger, are facing (Arnett, 2000).

### **Supporting College Student Development**

When supporting students, whether in distress or otherwise, student affairs professionals, including resident directors, approach the work they do with students as being developmental in nature (Jones, & Stewart, 2016). This approach to the work is informed by decades of psychosocial, cognitive, moral, and integrative theoretical research conducted using college students, ages 18-24, as sample populations (Patton et al., 2016). Student affairs professionals view their purpose as helping students to develop as individuals, make meaning of their

development, and identify tools and strategies that will support them in making informed decisions post-college (Patton et al., 2016). College in the U.S. is seen as a continual developmental experience for students, particularly those of traditional college age, so student affairs professionals believe that students are still learning and developing throughout their time in college, often using the fact that students are developing as a rationale for actions and behaviors of college students. Arnett (2000) posited that individuals between the ages of 18-29 are in the emerging adulthood developmental stage, where they are exploring their identity along with various possibilities for their future life. Arnett's theory is most applicable to individuals living in the U.S. and other Western societies, and individuals experience variations in their development during this stage depending on their socioeconomic status, race, and gender (Arnett, 2007; Cohen et al., 2003). Many college students fall within this age group; thus, while research recognizes that college is a continual developmental journey, a similar argument can be made for individuals throughout their twenties.

### **Anecdotal Accounts of Residence Life Well-being**

The social media post and responses to it shared at the beginning of this chapter are not unusual. While there are more positive posts including posts sharing resources or ideas in the aforementioned Groups (e.g., Student Affairs Professionals, Expatriates of Student Affairs), there are occasional posts which express frustrations or ask for advice on others' opinions about specific areas of improvement as it relates to the general nature of work in their functional area. These posts reflect conference presentations and thought pieces published within the past decade. A search in the Association of College and University Housing Officers - International (ACUHO-I) database using terms such as "live-in" alongside "staff well-being," "staff burnout," "staff retention," and "staff wellness" yielded sixteen results that were either presented at the

annual ACUHO-I conference or published in the *Talking Stick* since 2011. Examples included examining work-life balance (Allen, 2015; Brockmann et al., 2014; McGartland-Kinsella, 2012), retention of staff of color (Aranas & Gillian, 2019), impact of animals on staff well-being (Whitton, 2012), and burnout (Ellett & Stipeck, 2010; Mistretta & Dubois, 2019).

In 2018, ACUHO-I convened a taskforce to examine the evolving roles of live-in staff. This task force was charged with establishing a baseline knowledge of the resident director and resident assistant roles, identifying areas for further research as it pertains to these roles, and providing recommendations for next steps (Kasper, 2019). This taskforce noted that as a profession, residence life continues to recruit and discuss the role of the resident director in ways that reflect how the role operated in the late twentieth century (Kasper, 2019). However, the role of the resident director is starkly different and is no longer a position whose primary responsibility is to help build community and respond to mostly low-level after-hours issues (Kasper, 2019). According to findings from the taskforce presentation at the 2019 ACUHO-I annual conference, the resident director commonly supports students with significant mental health needs, navigates the complexities of emotional support animals in residence, manages parental involvement in student concerns, and responds to racial and other identity-based issues on a regular basis (Kasper, 2019).

It is important to note that other conference presentations that may also pertain to staff well-being and retention populated in the search, but these results did not include a link to the presentation to confirm topic relatability. A search in Google Scholar for journal and dissertation publications was also done using the same search terms alongside “residence life,” and yielded five dissertations and no journal articles published within the past decade. The date range was extended to search for publications since 1985 using the same terms, and this yielded one

additional dissertation and seven additional journal articles. In doing this search and reading the literature in existence, what was noteworthy was that there was much more literature published around student staff well-being and retention, as opposed to professional staff, as well as some articles exploring retention and well-being of student affairs professionals generally. An exhaustive search was not done to determine the number of publications for these two populations. Regardless, it was clear in the search of literature pertaining to live-in professionals that not much research has been published exploring how departments can support the well-being of their live-in professional staff members to prevent burnout and attrition from the field. However, there are more anecdotal experiences in the form of social media posts, conference presentations, and thought pieces published, emphasizing the need for formal research to be conducted to further explore live-in, professional staff well-being.

### **Statement of the Problem**

Since at least the 1980s, issues related to addressing burnout and retaining professional staff have been a priority within the larger residence life profession (Herr & Strange, 1985; Palmer et al., 2001). Recommendations to address the issue of burnout among resident directors have included providing additional time off to allow staff to rest, rewarding with additional compensation, and encouraging staff to seek the support of professional counselors (Palmer et al., 2001). Recommendations to address burnout among therapists, another helping profession, suggest that having more control in one's role at work contributes to a lower level of burnout, as well as having positive relationships with one's supervisor and colleagues (Rupert et al., 2015). Similarly, recommended practices around retaining residence life and other student affairs staff have included providing synergistic supervision, offering opportunities for professional development, and encouraging autonomy (Tull, 2006; Winston & Hirt, 2003).

In the late twentieth century into the early twenty-first century, Generation X (born between 1965-1980) largely assumed many of the entry to mid-level roles that this literature used as their population of study. In 2020, young professionals are a part of the Millennial Generation (born between 1981-1996), whose learning styles, as well as workplace expectations, differ significantly than that of Generation X and previous generations (Lyons & Kuron, 2014; Wilson, 2004). These expectations and learning styles are influenced by global events and innovations that have impacted all generations, but to different extents. For Millennials, their adolescence has been defined by global terrorism (e.g., 9/11) and their early adulthood by a global recession, both which impacted their development and how they view the world. Additionally, major innovations in the realm of technology and social media have also influenced their development and changed the way they interact and expect to interact with others (Twenge, 2014). These events and innovations have combined to have a significant impact on mental health for some individuals. Millennials, as well as Generation Z (born between 1997-2012), experience higher rates of mental health issues compared to previous generations (American Psychological Association, 2018). Increased rates of mental health issues amongst these generations have been known since many Millennials were in college, which means that young professionals are learning how to navigate the workplace with their existing conditions.

Seasoned professionals expect entry-level staff to be professionals, yet young professionals still have similar needs as current Generation Z college students. As student affairs professionals see college as a developmental journey, and Arnett (2000) identifies ages 18-29 as emerging adulthood, it might be beneficial to consider whether leaders within the profession are creating work environments that are developmental in nature for professionals in their twenties. To best foster this type of developmental environment, departmental leaders should consider

how the well-being of their employees influences their ability to perform and be productive in their roles (Grawitch et al., 2006). Therefore, placing an emphasis on promoting a culture of well-being among employees is necessary to effectively support productivity and performance.

### **Purpose of Study**

Research exists that explores burnout and reasons of attrition from the field of residence life by younger professionals (Collins & Hirt, 2006; Herr & Strange, 1985; Palmer et al., 2001). Yet, there is a need for further investigation into how residence life departments can better support the well-being of professionals, taking into account that these professionals are not much older than many college students and a lack of well-being is connected to burnout and toxic work culture. The purpose of this research study was to learn about current practices that support professional, live-in staff well-being in residence life and how these practices affect the experiences of staff members.

### **Significance of Study**

The resident director role has become unrecognizable from what the initial purpose of the position was. This position is seen as a common entry point for many young student affairs professionals; yet, the position's demands have become more stressful and lean towards supporting students in distress and managing other issues associated with the student experience as shared in the literature thus far. There is also only a small age and developmental difference between many resident directors and the students that they are actively working to support. As a result, in addition to meeting the demands of the position, resident directors are often still navigating the transition into young adulthood while learning to function as a full-time professional instead of a student. Further investigation into how the profession can best support the well-being of resident directors to minimize the rate of burnout and attrition from the

functional area and larger field is needed. While the nature of this study does not allow for generalizations, it provides a description of workplace practices that departments of residence life can implement to support a culture of well-being for their entry-level, live-in professional staff.

### **Definitions**

The following section defines terms that will be used throughout this research study:

*Residence Life* is the student affairs office where full and part time staff are dedicated to creating environments, structures, and programs that support the personal development and academic success of students who live on campus (Winston & Anchors, 1993).

*Resident Director* is “a full-time, live-in/on, entry-level position[s] in residence life with direct responsibility (programming, supervision, discipline, etc.) for residents within a building or complex of buildings” (Belch & Mueller, 2003, p. 31). Other common titles for this type of position include: residence hall coordinator, residential college director, and hall director.

*Culture* is “a system of shared values (that define what is important) and norms that define appropriate attitudes and behaviors for organizational members (how to feel and behave)” (O’Reilly & Chatman, 1996, p. 160).

*Well-being* is defined using the World Health Organization’s definition of health, which is “a state of complete physical, mental, and social well-being, not merely the absence of disease or infirmity” (World Health Organization, 1958, p. 459).

*Culture of well-being* is when an organization encourages and supports thriving lifestyles for its employees through embedding the idea of well-being into the organizational structure through policies and practices, offering wellness focused resources, and role modeling behaviors that promote well-being (Guo et al., 2015; Krause, 2017; Robison, 2013)

## **Research Questions**

The primary and secondary research questions are outlined below.

### **Primary Research Question**

The following question guided this research study:

- How do residence life departments support a culture of well-being for their professional, live-in staff?

### **Secondary Research Questions**

The following questions help to provide additional context in ensuring the primary research question is fully answered:

- What practices do departments currently implement to support the well-being of their professional, live-in staff?
- How do senior departmental leadership perceive the support they provide to promote a culture of well-being of professional, live-in staff members?
- How do professional, live-in staff perceive the support for their well-being from departmental leadership?

## **Conclusion**

The landscape of higher education has changed significantly in the 21<sup>st</sup> century in regard to the general needs of students attending college. As we round out the second decade of the 21<sup>st</sup> century, individuals who hold entry-level positions within residence life are typically individuals who graduated from college within this century. These newer professionals are bringing with them the experiences and issues they dealt with previously, including those experienced as a student, while also deciding who they are as professionals. Additionally, compared to their peers in other entry-level, student affairs positions, resident directors are dealing with more stressful

and high-level incidents on a routine basis (Thomas, 2018). While student affairs professionals in various functional areas might be aware of a residential student who is going through a challenging time, the resident director of the community the student lives in is usually always informed and expected to interact on some level with the student. The current nature of the resident director position often means these professionals are privy to sensitive information about students (Kasper, 2019). Being privy to sensitive information usually means that the staff who interact with the student must formally document interactions in a database. Documentation of these interactions adds work on top of already meeting with the student, connecting them with the appropriate resources, creating an action plan, and following up with the student one or more times in the future.

The live-in requirement for resident directors also adds a layer of complexity to their position. Resident directors frequently serve in an on-call rotation, yet to some extent, they are likely to respond to emergencies and high-level situations after hours regardless of whether they are on-call. While apartment dwellers may casually chat with their neighbors as they leave and return, for resident directors this means chatting with the students they serve. Conversations might be light, but there is always the possibility a student may stop and talk about a problem they are experiencing without realizing the resident director is not technically working. The resident director is then placed in a position of determining whether they continue the conversation, connect the student with (para)professional staff on-call, or ask the student to come to their office the next business day. Depending on the situation and the individual(s), it is not always an easy decision for the resident director to make, resulting in them working when they should not technically be working.

As such, senior leaders within residence life departments need to consider how they are supporting these professionals as they transition into the workforce and begin their careers. Residence life is known to have high rates of burnout and attrition from the field due to the unique demands of the live-in resident director position. Senior leaders should be mindful of how they are supporting a culture of well-being as the position of resident director is a common entry point into student affairs, retention of employees does matter, and the individuals assuming the position of resident director likely share many similarities with current college students. While not all entry-level professionals can or want to move up in residence life, there is merit in departments supporting well-being, particularly since cultivating good habits can contribute to a stronger sense of professional satisfaction and productivity long-term (Grawitch et al., 2006).

## CHAPTER 2

### LITERATURE REVIEW

Residence life administrators have long played an integral role in the administration of on-campus housing (Frederiksen, 1993). Specifically, the resident director position is a common entry-level position that many young professionals hold as an introduction to the larger field of student affairs, and many of these professionals live in/on campus (Astin, 1999). On campuses across the U.S., the role of these professional staff members has generally focused on supporting student development in physically and psychologically safe environments, building community, responding to crises, and managing the daily operations of the residential facility (Collins & Hirt, 2006). Over the years, professional staff have seen additional responsibilities added to their portfolio, particularly following national crises (e.g., September 11th, mass shootings, COVID-19) and changes in federal law (e.g., Title IX) (Nguyen et al., 2018). Changes in student demographics, influence of technology on work, and other evolving trends have also impacted the role of live-in staff members (Dungy, 2003). This position also requires professionals to work outside of traditional business hours (Collins & Hirt, 2006; Kearney, 1993). The unique structure and demands of this position have long been cited as contributing to burnout and attrition from the field (Herr & Strange, 1985).

This study is designed to explore how residence life departments currently promote a culture of well-being of their live-in, entry-level staff. To support the research design for this study, this literature review will discuss organizational theory and identify theoretical frameworks that frequently apply to institutions of higher education and influence the work

within residence life departments. The second part of the literature review will provide an overview of higher education organizational structure before detailing the placement of and history of residence life with specific attention paid to the purposes of resident directors and efforts made to retain full-time professionals. The literature review will culminate with a review of wellness literature, specifically as it relates to institutional wellness programs and wellness models often used within workplace environments.

### **Organizational Theory**

Organizational theory has a rich history with perspectives that apply broadly, as well as frameworks that apply to specific fields. Tenets of general organizational theories can be found embedded within specific fields' organizational frameworks. As such, before delving into models and theories that best support the operations of higher education institutions, it is important to provide a brief summary of three competing perspectives that influence common organizational theories used in present day.

#### **Bureaucratic Perspective**

Weberian bureaucracy, more commonly known as the bureaucratic model, is perhaps the most well-known organizational theory. Many consider Max Weber to be the father of bureaucracy, as he defined characteristics that a company, or organization, needs in order to operate efficiently; these include having a hierarchical structure and divisions of labor (Merton, 1939). Later bureaucratic theorists, such as Fayol, went a step further to suggest that organizations must remain nimble, open to change, and focused on ensuring that employees were motivated to do good work while adhering to many of the basic characteristics defined by Weber (Rodrigues, 2001). Many institutions operate at least partially from a bureaucratic perspective,

especially in more recent times when there is a priority in being cost-effective and demonstrating the organization's purpose to external stakeholders (Murphy, 2009).

### **Organized Anarchies Perspective**

Other organizational theorists recognize that not all organizations are set up to perform in a hierarchical, structured way and that leaders should consider other models and even disciplines to inform their structure and operations. Organized anarchies are organizations characterized by problematic preferences, unclear technology, and fluid participation (Cohen et al., 1972).

Institutions of higher education are frequently characterized by this model as they are seen as organizations possessing “collections of choices looking for problems, issues and feelings looking for decision situations in which they might be aired, (and) solutions looking for issues to which they might be an answer” (Cohen et al., 1972, p. 1). Institutions using this model have the potential to be good places to work as anarchies generally provide an opportunity for community building amongst members (Manning, 2017). This community building may include the formation of affinity groups and cultivating a sense of community where members look out for the general good of the group with an emphasis on personal responsibility and accountability for actions (Manning, 2017).

### **Positive Psychology or the Spiritual Perspective**

Psychology is another area organizational theorists have used to inform the creation of specific theories, drawing heavily on the works of Maslow and Rogers (Manning, 2017). The use of psychology research informs organizational theories that center human behavior and human experience over organizational outcomes (Manning, 2017). There are multiple sub-fields within psychology, and positive psychology is a sub-field which challenges individuals to use innate strengths to address personal issues (Mather, 2010). Positive psychology contains spiritual-like

characteristics (e.g., finding meaning in work, acknowledging the whole person, connecting personal well-being with healthy environments) (Manning, 2017; Mather, 2010). Institutions of higher education may incorporate elements of these frameworks in their organizational structure as institutions often emphasize the importance holistic development in governing documents (e.g., mission statement, values statement) (Braskamp et al., 2008). While institutions may strive to support the development of the whole person, the use of a spiritual perspective conflicts with a bureaucratic perspective, since in a bureaucracy leaders of the organization seek to suppress individuality (Manning, 2017).

### **Higher Education Organizational Theory**

Versions of these organizational frames help to provide structure to institutions of higher education. There are many notable scholars who have researched and published organizational development works that apply specifically to higher education settings. Birnbaum's (1991) seminal work *How Colleges Work: The Cybernetics of Academic Organization and Leadership* provided organizational models and theories to help administrators, faculty, and graduate students identify ways to best navigate the culture within their institutions. Since Birnbaum's contributions, many other scholars have published on the topic of organizational development using a wide range of lenses. Some scholars, such as Bastedo (2012), Bess and Dee (2012), and Schloss and Cragg (2013) have produced works on how administrators and faculty can apply organizational development frameworks to contemporary issues within higher education. Bastedo, along with Schloss and Cragg, has also applied business management concepts to address organizational development issues within higher education, recognizing the blurred lines between operating as an educational entity and a business. There has also been literature published that examines the role of collaboration between divisions of academic affairs,

administration, and student affairs in the organizational operations of an institution (Kezar & Lester, 2009).

Two of the more well-known sets of organizational development scholars within higher education are Bolman and Deal (1984/2017) and Manning (2012/2017). Bolman and Deal first published their four-frame leadership model in 1984, introducing readers to the structural, human resources, political, and symbolic frames (Bolman & Deal, 1984). Their model was expanded in 1991 in the text *Reframing Organizations: Artistry, Choice, and Leadership*, and there have been six editions published. Bolman and Deal are frequently cited as a foundational organizational development framework, while Manning explores organizational development as it pertains to institutions of higher education and published the first edition of her text, *Organizational Theory in Higher Education*, in 2012. Manning's theories are more nuanced and critically consider the ways that different higher education institution types (e.g., public vs. private, religious vs. non-religious, minority serving institutions vs. primarily white institutions) operate.

As Bolman and Deal's work is widely known, in and outside of higher education, a brief overview will be provided. As Manning specifically focuses on organizational development within higher education, a more detailed overview will be provided of her work as this research study is exploring well-being culture of staff working in institutions of higher education. Additionally, this research study will use three of Manning's theories, bureaucratic, organized anarchy, and spiritual, as a framework. These three theories will be more explicitly discussed than the rest of her theories in the sections to come.

### **Bolman and Deal's Four-Frame Model**

Bolman and Deal provide a four-frame model that is frequently referenced both in and outside of higher education (e.g., Dever, 1997; Kezar, 2003; Lueddeke, 1999). The frames they

proposed that shape an institution's operation are structural, human resources, political, and symbolic (Bolman & Deal, 2017). The structural frame adopts a more bureaucratic approach focusing on developing strategy, setting measurable goals, creating structured reporting lines, and implementing systems and procedures (Bolman & Deal, 2017). The human resources frame emphasizes the importance of employees to an organization. This frame posits that organizations must establish a foundation that contributes to job satisfaction among employees through offering opportunities for on-going development and supporting relationship building amongst staff (Bolman & Deal, 2017). The political frame acknowledges that conflict happens within organizations, and that to effectively navigate this conflict, members of the organization should build effective coalitions to gain power and support for when difficult decisions are made (Bolman & Deal, 2017). Finally, the symbolic frame recognizes that individuals need meaning and a sense of purpose to feel fulfilled in their work. As such, organizations should be mindful of the culture they create to inspire employees and retain them (Bolman & Deal, 2017).

### **Manning's Perspectives**

Manning is another scholar who has contributed much organizational theory scholarship specific to higher education. Manning uses an interdisciplinary approach to inform the creation of her perspectives, thus drawing on social theorists (e.g. Weber), psychologists (e.g. Maslow), and others, including higher education theorists (e.g. Birnbaum) (Manning, 2017). Manning uses a constructivist paradigm to design her perspectives, recognizing the experiences of people within organizations, organizational values, and other dynamics inform the overarching structure (Pantel & Yakaboski, 2014). In the initial edition of her work, *Organizational Theory in Higher Education*, Manning (2013) expanded upon Birnbaum's (1991) four frames - anarchical, bureaucratic, collegial, and political - while also incorporating culture (Deal & Kennedy, 1982 as

cited in Manning, 2017; Smircich, 1983), feminist (Calás & Smircich, 1999, 2006), new science (Wheatley, 2007, 2010), and spiritual (Zohar, 1997) perspectives. Manning originally organized the frames by significance to traditional systems of administration and leadership within higher education, although she changed the organization of perspectives to alphabetical order in the second edition of her text to allow readers the flexibility to select the order in which they read perspectives (Manning, 2017).

In the second edition, Manning also made changes to some of the perspectives to “reflect the current climate and issues in higher education” (Manning, 2017, p. xvii). She removed the new science perspective and included elements of it in the spiritual frame, inserted institutional theory, which draws on Immergut (1998) and Powell (2007), and expanded the feminist perspective to reflect the feminist and gendered perspective (Manning, 2017). Manning’s perspective on organizational theory is that no one theory applies to an entire institution, rather her perspectives are to be blended in practice to appropriately meet the individual characteristics of an institutional setting (Manning, 2017). As such, given the unique environment of residence life departments, this study will use three of Manning’s perspectives, bureaucratic, organized anarchy, and spiritual, as a framework that is most likely to apply to this particular setting. Before providing an overview to these three perspectives, I will first summarize her other five perspectives (Manning, 2017). This is to help in providing context and understanding as to why the three perspectives named, which are sometimes competing perspectives, are used to frame this study.

- **Collegium.** Manning (2017) asserted that leaders within the collegium perspective tend to promote equality amongst participants and value consensus when making decisions; thus, the metaphor of a circle is appropriate for this perspective. The notion of this perspective is that

all members of the organization are equal and have a voice, the reality is that the power resides with those who are high-ranking and/or popular faculty members and, as a result, leaves out the voices of many administrators, particularly those without terminal degrees.

- **Cultural.** Manning's (2017) cultural perspective places a high value on the role of rituals, symbols, and traditions to foster community amongst organizational members. The history of the organization also plays an influential role in creating community as it often communicates messages about shared beliefs, norms, and values of its members. An organization that utilizes the cultural perspective creates an environment that helps members make meaning of their experiences. It is important to note that similar to the collegium perspective, not everyone within an organization may feel they belong. The individuals who do not fit in with the culture of the organization may be ostracized.
- **Feminist and Gendered.** For Manning (2017) collaboration is an important component of this perspective, as leadership is often shared within the members of the organization. As a result, it is important that members have open communication and identify shared purposes before acting on decisions. Relationships are paramount to this perspective, so there tends to be increased participation amongst members. The issues that the organization is addressing often favor certain groups, so at times there may be a rotation of who is included and excluded from decision making processes, although everyone within the organization is likely to be included at some point.
- **Institutional Theory.** Under this perspective, Manning (2017) stated that individual institutions tend to be significantly different than one another, external pressures often force institutions to develop commonalities to one another despite these differences. External forces such as local ordinances, state budget allocations, and federal sexual assault policies

directly influence the operations of an institution. Members within the institution must find ways to make choices that adhere to these external forces while best supporting the institution's internal stakeholders.

- **Political.** Manning (2017) articulated that being in power or being connected to individuals who hold power within an institution is a crucial aspect of the political perspective. Developing networks and alliances is important to move agendas forward and accomplish goals. Conflict is natural within this perspective, and the way conflict is handled throughout the institution signifies its priorities in advancing as an organization.

Similar to other organizational types, higher education institutions vary in terms of organizational approaches they use to provide structure and governance to their individual institution. Of these five perspectives, public, flagship institutions might rely heavily on institutional theory and the political framework, as the local, state, and federal governments might have a significant influence on funding and operations, and so it is necessary for internal members to leverage their connections and resources to succeed in their work (Manning, 2017). Elite, private liberal arts institutions might rely more heavily on the collegium and cultural perspectives as these institutions might place more emphasis on the collective voice and meaning that people make as being a part of their institutional community (Manning, 2017). If this latter type of institution is also a women's college or has a significant female population in attendance, the feminist and gendered perspective might also influence its governance structure (Manning, 2017).

### ***Integrating the Remaining of Manning's Perspectives***

To a certain extent the institution types named in the above paragraph might also embody one of the other three perspectives that Manning included in her text. Bureaucratic, organized

anarchy, and spiritual perspectives all have characteristics which many institutions embody. A summary of each is provided below followed by a discussion on how these perspectives complement and detract from one another.

**Bureaucratic.** While more traditional to corporate settings, modern institutions have adopted bureaucratic principles such as hierarchical order, specialization, and accountability to govern daily operations (Manning, 2017). Power is held by those in positions of authority at the institution, and these individuals have the strongest voices in creating and implementing policies and protocols that govern the institution (Manning, 2017). Within a bureaucratic organization, every employee has their own specialization, or area of responsibility, and reports directly to one supervisor. An employee's inability to complete their work in ways that are deemed appropriate by those in power may result in job action (Manning, 2017). Additionally, within a bureaucratic organization, the "interests of one employee or group should not take precedence over the interests and concerns of the organization" (Manning, 2017, p. 17). Individuals are hired to work towards fulfilling the mission and are seen as replaceable when they leave the organization.

**Organized anarchy.** Cohen, March, and Olsen developed the organized anarchy theory in 1972 to describe organizations which are "familiar yet hard to describe, unpredictable though at times oddly rational, rooted in the past yet optimistically gazing into the future, traditional though educating many to anticipate change" (Manning, 2017, p. 132). While many organizations may experience organized anarchy, this theory is most apt for institutions of higher education (Cohen et al., 1972). Within organized anarchies, communities are crucial for survival, members must take responsibility for their actions and behaviors, and there is a dichotomy between concern of individual rights and community obligations (Manning, 2017). Fluid participation is a trait of organized anarchies contributing to an ebb and flow to the depth and

extent of how much an individual, or employee, is involved with various decision-making processes. As there is not consistent participation, mistakes may be continually remade and decisions reversed or forgotten (Manning, 2017). Reality is subjective meaning that organizational members may have different recollections of events and communication of said events may be incomplete (Manning, 2017). Thus, persistence is important as organizations are continually changing making opportunities for previously defeated ideas to gain support and traction (Manning, 2017).

**Spiritual.** The spiritual perspective has roots in positive psychology and seeks to create an organizational environment where employees are able to make meaning and better understand their purpose both at work and in the larger world (Manning, 2017). Organizations that incorporate this perspective recognize that employees bring their whole selves to work and this includes their emotions. As such, it is important to connect the heart and mind when making decisions as it is important to feel both intellectually and morally at peace (Manning, 2017). While an organization may have a guiding mission and purpose, the journey in working towards this is just as important as fulfilling the mission (Manning, 2017). There is also a recognition that the choices an organization makes impacts the various communities in and around them (Manning, 2017). It is important to establish relationships that allow for transparent dialogue and opportunities to create programs and services that are innovative (Manning, 2017). The spiritual perspective framework empowers those with marginalized identities to share their perspectives and feel heard, which supports changes in which these individuals feel more included (Manning, 2017).

## Summary of Organizational Theory

There are many factors which influence how organizations operate to achieve their purpose, which contribute to varying organizational theory perspectives. Application of organization theory is unique in that while organizations might share similarities, the people, culture, and institutional goals influence how theory is reflected in each individual institution (Manning, 2017). It is rare that one organization, or institution, might operate under the use of one theory, rather many institutions use a blend of multiple theories to guide their organizational work at various levels within the organization (Manning, 2017). While the bureaucratic, organized anarchy, and spiritual perspectives conflict with one another, these three perspectives can also complement one another depending on the level within the institution they are used. The senior leadership of the institution (e.g., president, chancellor, cabinet, board of trustees) might employ a bureaucratic framework to govern all divisions within the institution, while an organized anarchy framework might organically occur to help members across and within divisions of the institution to make meaning, contribute to one's purpose, and provide a rationale to the chaos of higher education. Finally, elements of the spiritual perspective may come to fruition in the work that is done within student affairs, a division focused on helping the whole student develop during college (Coomes & Gerda, 2016; Keeling, 2004). The spiritual framework is also applicable to work done within departments of residence life, as this area specifically works to help students connect learning in the classroom with out of class experiences, as well as develop non-cognitive skills to live successfully in society (Astin, 1999). The next section will discuss organizational structure of institutions, providing an overview of institution types, senior administration, and divisions of student affairs before detailing the history of residence life and roles of staff members.

## Higher Education's Organizational Structure

More than 7,000 institutions submit data to the National Center for Education Statistics (NCES) each year (Cragg & Henderson, 2013). Institutions submit demographic information and other variables that are unique to their institution; yet, the database that stores this information is able to identify commonalities and draw comparisons across institutions (Cragg & Henderson, 2013). As such, individuals who have an interest in higher education institutions are able to understand common organizational structures, key positions, and practices that define most U.S. institutions.

Institutions in the U.S. are generally considered to be either public or private institutions (Cragg & Henderson, 2013). Public institutions receive public funding, usually in the form of tax-payer dollars, and report to the state government generally through a Board of Regents or other oversight agencies (Bess & Dee, 2012; Cragg & Henderson, 2013). Public institutions include two-year community colleges and four-year degree-granting institutions, which may offer only baccalaureate degrees or offer degrees up to the doctoral level and may also function as a research intensive institution (Cragg & Henderson, 2013). Private institutions are funded through tuition and donations, and these institutions usually report to a board of trustees (Bess & Dee, 2012; Cragg & Henderson, 2013). Similar to public institutions, private institutions may range from two-year degree granting institutions to doctoral level, research intensive institutions (Cragg & Henderson, 2013). Private institutions do vary from public institutions in that they may be non-profit or for-profit (proprietary). Non-profit private institutions must direct surplus revenue to institutional goals, whereas for-profit institutions are able to use any revenue surplus in ways they best see fit (Cragg & Henderson, 2013).

Administratively, institutions are led by a president or chancellor, who is the senior most staff member (Kuk & Banning, 2009). Beneath this position, provosts and vice presidents (or vice chancellors) comprise the rest of the senior leadership team, providing oversight to the administrative and academic divisions within an institution (Cragg & Henderson, 2013). Divisions common across many four-year institutions include academic affairs; business, administration, and finance; development; enrollment management; human resources; research; and student affairs (Cragg & Henderson, 2013). Collaboration and general interaction across and within divisions vary depending upon the division's function. Student affairs is a division with many functional areas, and each functional area exists to serve a different purpose in contributing to the student experience (Dungy, 2003). While collaboration between functional areas may vary across institution type, the work of each functional area is guided by the overarching mission of its division of student affairs. The following section provides an overview of student affairs, including its general structure and purpose. An in-depth description of the history and purpose of residence life, a functional area nested within student affairs, follows with literature supporting the purposes and retention of resident directors.

### **Student Affairs**

The division of student affairs is designed to help students get the most out of their collegiate experience through supporting their academic endeavors, challenging their development, and instilling the knowledge and skills that will ideally help student succeed post-college (Coomes & Gerda, 2016). Student affairs is seen as a complementary division to academic affairs in that while students pursue higher education for a degree, the experience they have outside of the classroom can enhance and add meaning to their overall collegiate experience (Coomes & Gerda, 2016; Keeling, 2004).

Since the inception of student affairs, or student services, there has been much growth of the field in regard to the functional areas that exist on many college campuses (Caple, 1998; Gerda, 2006; Schwartz, 1997). In the early years, deans of men and deans of women (later consolidated into a dean of students role) provided support and services that met the needs of students outside of the classroom; however, as the student populations diversified in the early-to-mid 1900s, so did student needs (Gerda, 2006). A restructuring of student affairs work occurred that resulted in specific functional areas (e.g., residence life, student activities, recreation services) being formed to better meet the needs of the changing student body (ACE, 1949).

In 2014, NASPA's Research and Policy Institute identified thirty-nine functional areas which commonly are placed within the division of student affairs at an institution (Wesaw & Sponsler, 2014). Inclusion of these functional areas within student affairs varies by institution, but common areas included across institutions include Greek affairs, housing and residence life, multicultural services, service learning, and student conduct (Wesaw & Sponsler, 2014).

Student affairs is often structured hierarchically, meaning that the senior-most staff member within a functional area reports to the dean of students, assistant/associate vice-president, or even the vice-president of student affairs depending on the institutional structure (Kuk & Banning, 2009). The senior staff member of a residence life department is often the director (Upcraft, 1993). Depending on the size of the institution, residence life and housing services may be considered two separate units within a department, where each unit is led by a director and the entire department is led by an executive director (Upcraft, 1993). The director, and if applicable, executive director of a residence life department generally have much autonomy in the operations and execution of programs and services their department employs as

these individuals are typically seen as experts in the field among colleagues across student affairs (Schuh, 2004).

### ***Residence Life***

The implementation of the GI Bill following World War II led to an increase in student enrollment on college campuses across the United States (ACE, 1949; Caple, 1998). The diversity of students on college campuses also exploded, and more women and students of color began to enroll in larger numbers. The rise in enrollment was also connected to more students pursuing post-secondary education at institutions further away from their homes, requiring them to secure housing (Caple, 1998). Institutions viewed this as an opportunity to create affordable on-campus housing for students (Schuh, 2004).

The 1960s marked a dramatic shift for the residence life profession (Riker, 1993). As more students resided on campus, students also pressured institutions to end *in loco parentis*. Since the early days of higher education in the U.S., *in loco parentis* was the idea that campus faculty and administrators served in the role of parents to students while they were studying at the institution (Caple, 1998). Many institutions employed dorm mothers, who lived in the residence halls where they nurtured, counseled, and warned of poor behavior when students were misbehaving, much as students' parents might have treated them while living at home (Leana, 2006). The new generation of college students enrolling in the mid-1900s felt that they did not need, nor want, administrators serving as their parents because they viewed college as a time to become more autonomous individuals (Caple, 1998). Administrators working in campus housing adapted to this change and shifted their work to address administrative, facilities maintenance, and student development needs within the residential communities (Frederiksen, 1993; Riker, 1993). However, in these early formalized days of residence life, administrators' primary

responsibility was to develop relationships and build community among the students living in the residence halls (Frederiksen, 1993). During this period, the skeletal version of the resident director position, as known today, came into existence (Frederiksen, 1993).

During the 1960s and into the 1970s, there was also an influx in literature on the effect of residential living on student development, persistence, and success (Astin, 1973; Chickering 1974; Riker, 1993). It was following the publication of this research that resident director roles began to shift to provide more intentional leadership and development opportunities for residential students, as well as serve in a more helping capacity (Collins & Hirt, 2006; Riker, 1993). The roles of student staff, known as resident assistants (RA), also began to grow in responsibility on campuses during this time. The growth of the RA position required resident directors to spend more time training and supervising these student staff members in ways that allowed them to better support their peers living in their community (Winston & Fitch, 1993).

In the decades that followed this period, more literature has been published regarding the role of residence life on student development and retention (Blimling, 1993; Pascarella, 1985; Winston & Anchors, 1993). A hierarchical organizational structure exists within residence life offices, with the resident director typically on the front lines serving students living in residence (Upcraft, 1993). The primary focus of the resident director position has been, and continues to be, to support the out-of-classroom development of students (Astin, 1999). Changing campus demographics, socio-political issues, and legislation have influenced the evolution of the resident director position (Dungy, 2003; Nguyen et al., 2018). Despite these changes, institutions often still emphasize supporting student development as one of the core functions of the position, yet resident directors have seen an uptick in responsibilities related to administrative work, addressing student behavior, crisis response, parental interactions, and institutional

responsibilities (Collins & Hirt, 2006). In 2018, the resident director continued to be a full-time, live-in/on, entry-level position that oversees programming, supervises student staff, responds to crises, and enforces policy (Kasper, 2019). Additionally, a cursory glance of resident director position descriptions on *higheredjobs.com* (2019) indicates that many institutions prefer or require candidates to possess a master's in counseling, higher education, student affairs, or a related field.

**Purpose and Demographics of Resident Directors.** Resident directors hold significant roles in residence life departments where they work, serving the needs of their residential students daily, while also working towards fulfilling their institution's mission (St. Onge et al., 2008). Within the office of residence life, resident directors typically have responsibilities in serving as a community builder by facilitating learning opportunities, coordinating support services for residential students in crisis, as well as overseeing aspects of housing operations which include assignments, room preparations, coordinating facilities and maintenance work (CAS, 2018; St. Onge et al., 2008). Resident directors also supervise resident assistants (RAs), whose primary responsibilities are also to build community, enforce policy, and help students (Schroeder & Mable, 1994). Other responsibilities of resident directors may vary institutionally and require these individuals to work closely with other student affairs offices and serve on departmental, divisional, and/or institutional committees (Schroeder & Mable, 1994). Resident directors are frequently asked to take on night and weekend responsibilities with the rationale sometimes being that living on campus makes it easier for them to get to and leave an event (Collins & Hirt, 2006).

To prepare them for their roles, resident directors receive extensive training to learn new knowledge and skills (Kearney, 1993). Annual trainings are often common for returning resident

directors, where they may participate in sessions that serve as content refreshers, as well as sessions that provide new knowledge and skills to help them better perform in their roles (Kearney, 1993). Training sessions may focus on supporting students with marginalized identities, coaching students through conflicts, strengthening helping skills, and building a sense of community for all residential students (Lovell & Kosten, 2000; Pope & Reynolds, 1997; Stauffer & Kimmel, 2019). While a caveat of utilizing resources and referring students to other campus offices is often embedded into these trainings, the notion that resident directors should know a little bit of everything is a prevalent idea in the field.

In the past couple of decades, institutions have placed more of an emphasis on supporting student success and well-being, and resident directors hold an important role in supporting this work (Dusselier et al., 2005). Residence halls directly influence student well-being through fostering a sense of belonging, promoting a safe and inclusive environment where residents are able to focus on their academics, and addressing incidents, such as alcohol and drug use, when these issues arise (Dusselier et al., 2005). To reflect this commitment, an increase in staff training to support student well-being has also occurred.

As previously mentioned, individuals who hold the position of resident director likely possess a master's degree in counseling, student affairs, or a related field prior to assuming a full-time position (*HigherEd Jobs*, 2019). These professionals, on average, tend to be in early adulthood as the resident director position is considered to be an entry-level position (Belch & Mueller, 2003). Since they are often close in age to many of the students living on campus, they are in unique positions to relate and form stronger connections with the residents they serve (Hunter, 1992). This dynamic, compounded with residence life's commitment to promote student well-being, means that resident directors, whether they choose to or not, often serve as role

models to residential students (MacKinnon et al., 2004). As such, it is imperative that these entry-level professionals should model what it means to live a balanced, healthy life (MacKinnon et al., 2004).

**Retention of Resident Directors.** In much of the literature, recruitment and retention are discussed simultaneously as each informs the success of the other (e.g., Scheuermann & Ellett, 2007; St. Onge et al., 2008). However, for the purposes of this study, retention is important to consider when considering how departments support and promote a culture of well-being for their staff. As previously highlighted, the resident director position is a common position that many young professionals hold as their introduction to the student affairs profession, yet due to position responsibilities, live-in component, and little opportunity for advancement within residence life, they may depart prematurely compared to entry-level professionals in other functional areas (Dunkel & Schreiber, 1992; Herr & Strange, 1985). Burnout is often cited as a reason for professionals to exit the field, and this has been a concern for many decades (Herr & Strange, 1985; St. Onge et al., 2008). Burnout is considered as lacking the ability to mentally concentrate, struggling to remain motivated, and having poor energy, all of which contribute to poor job performance (Palmer et al., 2001). Palmer et al. (2001) indicated that there are multiple signs of burnout, such as a poor attitude, frequent illnesses, fatigue, and weight changes in an individual.

There are suggestions for how departments may combat burnout, which could help in retention efforts and also promote employee well-being. General research around workplace culture in the United States suggests that appropriate delegation of work, supportive leadership, physically safe and comfortable offices, and fair employee policies contribute to healthy work environments that support individual well-being (Grawitch et al., 2006). Research specific to

residence life suggests that organizational culture, relationships, and job responsibilities and opportunities are central to retaining staff (Belch et al., 2009; Scheuermann & Ellett, 2007; St. Onge et al., 2008). Environments that allow for professionals to have autonomy and a sense of responsibility in their work contribute to a positive work experience (Belch et al., 2009).

Additionally these environments, or work cultures, should also provide resident directors with possibilities to partake in a range of professional development options, internal and external to the institution (Belch et al., 2009). These opportunities provide resident directors a chance to form relationships with staff outside of their functional area, which may contribute to their well-being and work satisfaction (Collins & Hirt, 2006). Relationships are also crucial in retaining staff, with an emphasis on intentional supervision where staff feel supported, encouraged to succeed, and able to seek help when needed (Henning et al., 2011; Palmer et al., 2001; Scheuermann & Ellett, 2007). Additionally, supervisors can play an important role in modeling good well-being behaviors and directly intervening when they see possible issues arise that might be impacting the well-being of the staff they supervise (Palmer et al., 2001).

### **Summarizing the Organizational Structure of Student Affairs and Residence Life**

Given the multiple layers and divisions that compose a typical institution, senior leaders within divisions and, specifically, departments are responsible for providing guidance, resources, and other support to their staff so they can be equipped to perform at their best within their roles. While institutional policies and protocols might exist to support staff in their roles to a certain extent, the unique nature and culture of live-in staff require department leadership to creatively consider how else they are supporting their staff to be effective in their roles with students. One theme with the retention efforts outlined above is that all ideas connect to well-being. As such, the next section will provide an overview of common wellness models that influence programs

and practices before discussing common programs and services institutions employ to support employee well-being.

### **Wellness**

Since the 1990s, there has been an increase in literature supporting the idea that an individual's work environment impacts their holistic well-being (Grawitch et al., 2006; Leiter & Cooper, 2017). Factors that inform healthy work environments include appropriate delegation of work, supportive leadership, physically safe and comfortable offices, and fair employee policies (Grawitch et al., 2006). When individuals work in environments where productivity and satisfaction soars, these environments can positively impact retention and promote individual wellness (Leiter & Cooper, 2017). When individuals are holistically well, they tend to perform better at work (Buzza, 2017; Grawitch et al., 2006; Leiter & Cooper, 2017). This cyclical effect not only impacts individuals, but organizations as a whole.

Since the introduction of this literature regarding the link between workplace and individual well-being, many institutions of higher education have responded by creating and implementing institution-wide wellness programs. These programs are often coordinated and executed through human resources, as the function of human resources is to hire, train, and develop all institutional employees (Bolman & Deal, 2017; Rose et al., 2017). These programs may be open to all employees or limited to a specific population (e.g., individuals who smoke seeking to quit) (Rose et al., 2017). To structure these programs, institutions often use a wellness model or framework. Favored wellness models to use in the workplace, both in and outside of higher education, include the Wheel of Wellness (Witmer & Sweeney, 1991), various dimensional wellness models (Hettler, 1984; Swarbrick, 2006), and the World Health Organization definition of health (WHO, 2006). The following section of the literature review

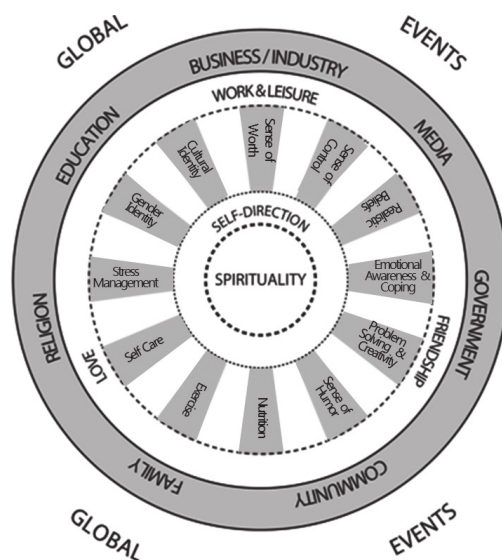
will discuss these models. A summary of common wellness programs at institutions and the purposes behind these programs will round out this section.

### **The Wheel of Wellness**

Witmer and Sweeney (1991) proposed a model of wellness and prevention based on WHO's definition, and their model also drew on concepts from anthropology, education, psychology, religion, and sociology. The rationale behind the creation of the Wheel of Wellness is that maintaining well-being depends on many lifestyle factors, voluntary and involuntary, and to achieve holistic well-being an individual must achieve wholeness in the mind, body, and spirit (Witmer & Sweeney, 1991). The original Wheel of Wellness (WoW) model identified five life tasks which characterize wellness. These life tasks include friendship, love, spirituality, self-regulation, and work, with spirituality being the central characteristic that strongly influences an individual's ability to practice a well-balanced lifestyle (Witmer & Sweeney, 1991). In the case of the WoW model, spirituality is comprised of being able to identify one's purpose and to have optimism, guiding values, and a sense of oneness; thus, these characteristics influence how an individual will approach all other areas of their life (Witmer & Sweeney, 1991). The next most important life task is self-regulation, as this consists of "characteristics as sense of worth; sense of control; realistic beliefs; spontaneous and emotional responsiveness; intellectual stimulation, problem solving, and creativity; sense of humor; and physical fitness and nutrition" (Witmer & Sweeney, 1991, p. 140). The other three life tasks, friendship, love, and work, are positioned within the WoW model to have equal influences on individual well-being (Witmer & Sweeney, 1991). All of the life tasks named interact with forces within the world, including community, education, family, government, media, and religion (Witmer & Sweeney, 1991). Global events

also influence individual well-being based on how these events affect the forces and tasks in one's life (Witmer & Sweeney, 1991).

The intent of the WoW model was to demonstrate the complex ways in which one's well-being is affected; yet, critiques of the model indicated that there were characteristics missing that influenced well-being, so the model was revised (Myers et al., 2000). The revised model separated the work life task into two separate tasks of work and leisure (Myers et al., 2000). Self-regulation was renamed to self-direction, and the characteristics also changed (Myers et al., 2000). Some of the original characteristics of self-regulation were revised, others eliminated, and new ones identified (Myers et al., 2000). The new self-direction characteristics include: "sense of worth, sense of control, realistic beliefs, emotional awareness and coping, problem solving and creativity, sense of humor, nutrition, exercise, self-care, stress management, gender identity, and cultural identity" (Myers et al., 2000, p. 252). A figure of the revised model is on the next page.

**Figure 1***Wheel of Wellness (WoW)*

*Note.* Image of the Wheel of Wellness (WoW). Adapted from: Myers, J. E., Sweeney, T. J., & Witmer, J. M. (2000). The Wheel of Wellness counseling for wellness: A holistic model for treatment planning. *Journal of Counseling & Development*, 78(3), 251–266.

The Wheel of Wellness model is comprehensive in identifying how one’s well-being is influenced and is a good model to use in situations such as counseling or even in structuring the programs and services that a non-profit may provide to a specific community (Myers et al., 2000). While the environment and experiences of live-in professionals are also complex and interconnected, this model may be too nuanced for residence life departments to use to support the well-being of their professional staff as the departments’ priority is to serve the students living on campus.

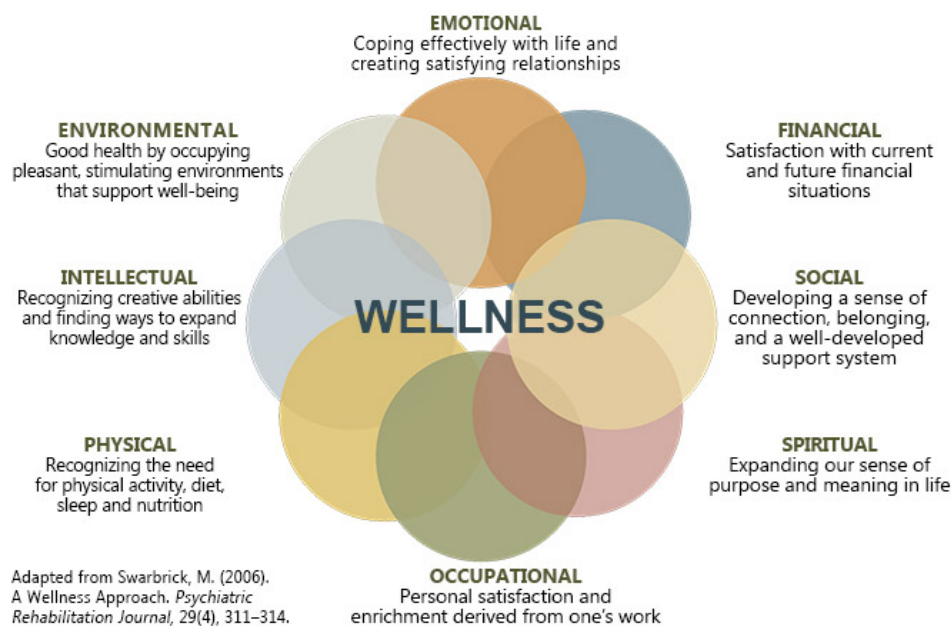
### **Dimensional Models of Wellness**

Other models of wellness also note the complex and interconnected ways in which multiple areas or individual characteristics influence an individual’s well-being. Dimensional models of wellness have been popular for the past few decades. One of the first dimensional

models created consisted of eight dimensions (family life, job satisfaction, leisure time, physical fitness, psychological, relationships, spiritual, and stress management) (Ardell, 1988 as cited in Myers, 1992). Another early model consisted of six dimensions, which shared similarities with Ardell's model and was comprised of emotional, intellectual, occupational, physical, social, and spiritual components (Hettler, 1984). Later dimensional models evolved from Ardell's and Hettler's models. A current, favored eight-dimensional model consists of emotional, environmental, financial, intellectual, occupational, physical, social, and spiritual domains (Swarbrick, 1997; Swarbrick, 2006). The Substance Abuse and Mental Health Services Administration (SAMHSA) has adapted Swarbrick's model and uses the model to inform the programs and services they provide to the general public (SAMHSA, 2016). A figure of this model is below.

## Figure 2

### *Eight Dimensions of Wellness*



*Note.* Image of the Eight Dimensions of Wellness. Adapted from: Swarbrick, M. (2006). A wellness approach. *Psychiatric Rehabilitation Journal*, 29(4), 311–314.

These dimensional models of wellness share many similarities. All of the models link individual dimensions together, implying that the degree of wellness in one dimension influences degrees of wellness in other areas (Ardell, 1988 as cited in Myers, 1992; Hettler, 1984; Swarbrick, 2006). In other words, holistic well-being can only be achieved when one is taking care of their wellness in each dimension. When using a dimensional model, one must consider how they are creating programs and services which complement each other and address the needs within each dimension. The same argument made against the use of the Wheel of Wellness model in a residence life environment applies to using a dimensional model. The complexity of these models requires much intentionality in creating programs and services. Therefore, this model might not be the best model to use to support live-in residence life professional staff.

### **World Health Organization's Definition of Health**

The World Health Organization (WHO) is a public agency nested within the United Nations dedicated to addressing, educating, and supporting international public health issues (World Health Organization, 1958). The organization, while officially established in 1948, created and signed their organizational constitution into effect in 1946 (World Health Organization, 1958). At the time, sixty-one countries signed the constitution (World Health Organization, 1958). The first statement within their constitution defines health as being “a state of complete physical, mental, and social well-being, not merely the absence of disease or infirmity” (World Health Organization, 1958, p. 459).

The WHO's initial definition of health has remained popular world-wide and continues to inform programs and services in the 21<sup>st</sup> century in part because it identifies three distinct dimensions of health which encompass many determinants (World Health Organization, n.d.). The determinants, which affect the physical, mental, and social dimensions of health, include

economic, environmental, personal, and social environments in which one is born and lives within throughout their life (World Health Organization, n.d.). Factors such as money, resources, and sources of power influence the effect social determinants have on an individual's health (Centers for Disease Control, 2018). These environments and factors affect both individual and community health promoting health inequities and contributing to higher rates of disease, infection, and violence among marginalized populations (Centers for Disease Control, 2018; World Health Organization, n.d.).

Despite its popularity, there are many criticisms of the definition, including that it is utopian and unrealistic given the varying climates and living conditions across the world (Saracci, 1997). A criticism that emerged in the late 20<sup>th</sup> century from members of WHO and the general public is that the definition lacks a spiritual well-being dimension (World Health Assembly, 1983a, 1983b). In the early 1980s, over twenty countries from different regions sought to change this by drafting a resolution to include spiritual well-being in a revised definition (World Health Assembly, 1983a, 1983b). Numerous conversations at WHO assemblies and executive board meetings have occurred since, but no inclusion of a spiritual well-being dimension has officially been incorporated into the constitutional definition as varied definitions of spirituality exist across different religions and world regions (Chirico, 2016; Draper & McSherry, 2002). There does seem to be an accepted understanding that spiritual wellness plays a significant role in many people's lives, and at times, the spiritual dimension has been added onto the existing WHO health definition in certain publications and research agendas (Draper & McSherry, 2002; Vader, 2006).

While criticisms of WHO's model exists, as previously mentioned it is still the most widely accepted and used definition of health and wellness. The WHO's definition of health has

informed the creation of many popular wellness models as well as wellness-based programs and services (Hettler, 1984; Swarbrick, 1997; Witmer & Sweeney, 1991). The simplistic definition allows for scholars to use WHO's dimensions and determinants to create models which explicitly show how these dimensions and determinants influence one another (Hettler, 1984; Swarbrick, 1997; Witmer & Sweeney, 1991). Additionally, application of WHO's definition of health to wellness-based programs and services allow for organizations to create wellness programs grounded in supporting the holistic well-being, or the mind, body, and spirit, of their employees (Leiter & Cooper, 2017). The next section discusses common wellness programs that occur across institutions in the United States.

### **Wellness Programs at Institutions**

Organizations experience multiple benefits when they cultivate a wellness culture (Rose et al., 2017). When institutional employees have access to work-based wellness initiatives, there is often a reduction in absenteeism as well as a reduction in health care costs, both to the employer and employee (Haines et al., 2007; Rose et al., 2017). Linked to these reductions are increases in morale and quality of work life, which aid in retention of employees and supports in recruiting top talent (Michaels & Greene, 2013; Rose et al., 2017).

Common programs offered through human resources tend to be life-style management (e.g., health education, stress management, substance use) and intervention based (e.g., smoking cessation, fitness programs, weight management) (Michaels & Greene, 2013). Many institutions that offer wellness programs often also provide screening activities (e.g., cancer screenings, substance abuse) (Michaels & Greene, 2013). While these programs require financial and other resources, employers who create an environment that supports and promotes the health of all members reap long-term benefits in terms of worker productivity and retention of employees

(Haines et al., 2007). Some benefits, such as performance gains, are noticeable in as little as 6-12 months following the implementation of a robust wellness program that caters to all employees (Gagnon et al., 2017). Organizations that see the highest return on investment in employee wellness initiatives are ones that adopt programs that cater to generational needs (Rose et al., 2017). In other words, the wellness needs of one generation are not always the same as another generation's need and employer expectations. In higher education, it may also be beneficial to tailor wellness programs to meet the needs of employees within different areas on campus.

Much research has explored the effects of wellness programs on faculty and staff populations over the past several decades. In the late 1980s, a wellness program was created specifically for student affairs professionals at The University of Texas at Arlington in response to a substantial increase in job dissatisfaction over the previous several years (Moxley, 1990). There were also several other organizational issues that the program was intended to address including reducing stress levels, use of sick leave, and turnover rates, while increasing productivity, morale, and interactions among staff (Moxley, 1990). The wellness program was two-pronged and centered on promoting physical wellness by engaging participants in a physical fitness program and providing a health education program (Moxley, 1990). Those who participated had improved physiological health, were less likely to leave the institution, and indicated lower stress levels while actively participating in the program, but there were few other benefits to participating in the program (Moxley, 1990). As such, while an institution should incorporate wellness components that promote physical well-being, additional direct interventions also need to be provided that aid in improving job satisfaction and morale.

Another study explored emotional well-being of students enrolled in a student affairs graduate program (Burke et al., 2016). Participants either worked in assistantships or in entry-

level, full-time roles while pursuing their degree. As part of the study, participants participated in a six-session mindfulness course during a semester, took three emotional well-being assessments, and participated in a focus group to discuss mindfulness (Burke et al., 2016). The study determined that mindfulness can support holistic well-being and may help with stress management and decreasing attrition of employees (Burke et al., 2016). A study on enhancing well-being of student affairs professionals at a South African institution found that encouraging positive relationships between colleagues, creating manageable workloads, and providing a good salary and benefits package promote and support staff well-being (van Straaten et al., 2016).

Two more recent research studies explored full-time student affairs staff well-being as it relates to quality of workplace and self-care practices utilized by professionals (Chessman, 2021; Preston et al., 2021). The studies acknowledged the increasing trauma history students are bringing with them to college and external influences, such as COVID-19, that drive the work that professionals are required to do to support students in current times. Burnout indicators, including that of compassion fatigue, were found to result in lower quality of life and poorer health for professionals, thus indicating that there is much room for improvement as it relates to staff-wellbeing (Chessman, 2021; Preston et al., 2021). When staff's own well-being is poor, then this can negatively impact the out-of-class experience for students, as students then do not receive the support they need to thrive (Chessman, 2021).

Recognizing that many student affairs staff do not work traditional business hours, intentionality in creating flex working policies and compensating with additional time off is one strategy to begin to address and support staff well-being (Preston et al., 2021). However, better work-life balance, or integration, is not enough. Chessman (2021) suggests that to foster an environment that better supports staff well-being, a positive relationship with their supervisor is

needed where there are also conversations around goal-setting, engagement in on-going trainings, and professional development that support the interests of the employee. Other practices that can support employee well-being include incorporating mindfulness activities into daily work, integrating well-being goals into annual performance appraisals, and identifying on an institutional level how efforts can be made around increasing workers' autonomy and reexamining how work is accomplished and by whom within the organization (Chessman, 2021; Preston et al., 2021). In offering these opportunities, supervisors begin to foster a culture of well-being for their staff that can increase both job and life satisfaction, among other outcomes (Chessman, 2021). Additionally, senior leaders who role model positive, healthy behaviors (e.g., scheduling workouts during the day, limiting after hours email) can also contribute to the overall culture that promotes healthy well-being in the workplace (Chessman, 2021).

All of these studies demonstrate the need of wellness programs at institutions and imply that in order to best support the well-being of employees, wellness programs should take a holistic approach in supporting the different areas of well-being, recognizing the value of all staff members in creating this culture (Chessman, 2021).

### **Summarizing Common Wellness Models Programs**

Research demonstrates the importance of employers considering how the workplace influences individual well-being. Maintaining well-being has positive effects on an individual's personal life, as well as contributes to their contentment with their career. As such, many workplaces offer various wellness programs to promote healthy, holistic living to their employees. To construct a wellness program that is holistic in nature, employers can use a well-being model as its framework in developing programs and supports that meet the various dimensions of well-being. The models discussed in this section, Wheel of Wellness, dimensional

models, and WHO's definition of health are a few of the more popular models that organizations draw on in constructing their programs.

### **Conclusion**

The current traditional hall director position does not always account for the link between personal well-being and healthy work environments. The lack of attention to this connection is apparent in the current structure and expectation of performance of an individual in this role, which consists of managing a robust work portfolio, working outside traditional business hours, responding to crises, and living with students (Collins & Hirt, 2006). In other words, elements of the resident director position often negate what researchers deem necessary in work environments to promote well-being. Promoting healthy work environments should be a priority for all residence life departments, and this may result in departments needing to think creatively how they promote well-being practices to their staff.

To create this culture, department leadership needs to consider the institutional environment in which they are operating in, the settings their work occurs within, and how a wellness model can best be used to inform the programs, services, and support that is provided to professional live-in staff. This literature review provided a detailed overview of organizational theory, summarizing theories (e.g. Bolman and Deal's four frame model and Manning's eight organizational theories) often used to inform how institutions of higher education choose to structure themselves and operate. The literature review further explained organizational structures, the placement of residence life departments within institutions, residence life staffing purposes, and retention efforts. Finally, this literature review identified wellness models used to inform practices and services meant to promote holistic well-being practices, with attention paid

to the construction of wellness programs in the workplace, such as a wellness program executed at The University of Texas at Arlington.

When considering the intricacies of each of these content areas and how they may complement and detract from one another, it is important to be intentional with choosing the frameworks that will inform the construction of this study. The work done by residence life professionals on campuses is special in that they connect with students in ways that other professionals on campus are not readily able to do due to their environment (residential/home setting) and hours present in the communities they manage and often live in themselves. The work of residence life professionals is guided by the institutional structure, which traditionally has elements of a bureaucratic structure operating under organized anarchy, and residence life professionals often infuse elements of a spiritual perspective in providing transformational programs and services to their residential students. The work of residence life professionals is mostly executed within residence halls, which happens to be where many entry-level professionals, particularly those in resident director roles, also live. Arguably, these professionals work to ensure that their residents maintain holistic wellness so that they can be successful in their academic and personal endeavors in college.

Given this information, it makes sense to use elements of Manning's bureaucratic, organized anarchy, and spiritual frameworks within a residence life setting along with the World Health Organization's Wellness Model to create cultures which support and promote professional staff well-being. Therefore, this study will use these organizational frameworks and wellness model to inform the construction of the research design and data analysis.

## CHAPTER 3

### METHODOLOGY

The purpose of this research study was to learn about how the well-being of professional, live-in staff is supported. To guide the creation and analysis of this research study, I reviewed three bodies of literature in chapter two. The first body of literature centered on organizational theory, focusing on Manning's (2017) bureaucratic, organized anarchy, and spiritual perspectives. The second body of literature focused on the organizational structure of institutions of higher education, examining both student affairs collectively and residence life. Finally, wellness theories and models were reviewed with an emphasis on the World Health Organization's definition of health (1958). Additionally, the perspective I held as a researcher informed the creation of the data collection methods and analysis of data collected, so it is necessary to share my perspective.

As a researcher, I lean towards a realist, or positivist, perspective where I strive to identify a single reality, although individuals may interpret and make meaning differently based on their positioning (Mertens, 2010; Yin, 2018). However, as I approached this specific research case study, I recognized that social determinants of health influence one's own well-being (Centers for Disease Control, 2018; World Health Organization, n.d.), despite most institutions' best intentions to create work environments which promote and commit to creating equal opportunities for all employees under federal and state guidelines (EEOC, n.d.). Departments of residence life therefore follow these laws; however, the reality of staff's lived experiences prior to joining the department and outside of work influenced the ways that they can show up and

engage in their work. In other words, despite departments' presumably best efforts to treat employees equally, inequality still existed in their lives overall. For professionals who live-in, their well-being is marred by the experiences they have had due to their social identities. While well-being measures implemented by a department were done so with the intent to promote equality, the way these practices influenced and affected individual employees differed.

Thus, as I engaged in this research, I used a realist perspective, while acknowledging perceived imbalances of support (Yin, 2018). In this way, I determined a case study was an appropriate methodology for this specific study as I was seeking to better understand how departments of residence life supported a culture of well-being while recognizing the importance of contextual conditions that directly and indirectly influenced the perception of this support (Yin, 2018). To guide this research study, I asked the following question:

- How do residence life departments support a culture of well-being for their professional, live-in staff?

To ensure this research question was fully answered in this case study, the following questions were asked to help to provide additional context:

- What practices do departments currently implement to support the well-being of their professional, live-in staff?
- How do senior departmental leadership perceive the support they provide to promote a culture of well-being of professional, live-in staff members?
- How do professional, live-in staff perceive the support for their well-being from departmental leadership?

To examine these questions, a qualitative case study was conducted. A qualitative case study allowed for me, the researcher, to understand how professional, live-in staff understood and

made meaning of the well-being support they received in their department, as well as understood and made meaning of the support department leaders believed they provided to professional, live-in staff. By understanding both perspectives, I make recommendations for how departments can provide well-being support that is feasible and equitable from a leadership perspective while meeting the needs of professional, live-in staff. A theoretical proposition used was that the organizational frames in which a department operated influenced the perceived well-being support that professional, live-in staff received. A rival explanation was that a department's organizational framework did not influence the perceived well-being support that professional, live-in staff received.

### **COVID-19 Disclaimer**

In late 2019, China announced there was an outbreak from a newly discovered infectious disease in the province of Wuhan, eventually termed as Coronavirus Disease 2019 (COVID-19) (WHO, 2020). What began as a serious public health issue in China soon spread to other countries, causing a worldwide pandemic. COVID-19 is highly infectious and thought to spread predominantly from person-to-person through respiratory droplets but can also spread through touching surfaces that contain the virus (CDC, 2020a). Certain factors, such as being over the age of sixty and having underlying medical conditions, put individuals at a higher risk for developing serious complications from COVID-19 (CDC, 2020b). Many people who contract COVID-19 may be asymptomatic, and the disease is thought to spread even before others begin showing symptoms (CDC, 2020a). Additionally, as this is a relatively new coronavirus at the time of this dissertation research study, there was little known about how to treat the disease, and a preventative vaccine was not widely available when conducting this research study.

At the time of this research study, countries had taken significant measures to curb the spread of the disease including implementing lockdowns and requiring those with or exposed to the disease to quarantine themselves for fourteen days (CDC, 2020c). As a result of these measures, many businesses and organizations shut their doors all together or transitioned to working remotely in early spring 2020. Institutions of higher education were also impacted, with many institutions in the U.S. moving their spring classes to online and ordering students not to return to campus in March and April 2020. As of June 2020 in the United States, many cities began to allow businesses to reopen their doors to the public and resume operations; however, for many businesses, it is not considered normal operations (Lee et al., 2020). Many people continued working from home, and it is anticipated the future of the office work environment is likely to be different even post-pandemic (Boland et al., 2020). In June and early July 2020, many institutions of higher education initially announced their plans for how they would deliver courses to students for fall semester and whether students could reside on campus (e.g., online versus in-person classes, housing occupancy for students on campuses) (Burke, 2020). Many institutions who initially opted to return to in-person classes reversed their decision in August 2020 (Whitford, 2020). Similar to other workplaces which allowed employees to return to work, institutions also shared their plans over the summer for employees to return to work which include limiting the number of people in shared spaces, removing access to communal items such as water coolers, and requiring employees to wear face masks when in the presence of others (CDC, 2020d).

While new guidance and research continues to be published about prevention and treatment of COVID-19, it is apparent that this is a pandemic that the world will continue to grapple with for the near and, possibly, distant future. Health professionals anticipated a second,

worse wave of COVID-19 to occur in fall 2020 and winter 2021, and it did (Bajak, 2021; Strazewski, 2020). The initial conceptualization of this case study entailed the researcher physically visiting two to three institutions to collect data. In-person individual interviews, direct observations, and document analysis were going to be the data collection methods used. Considering the uncertainty of the future of the pandemic, the researcher decided to modify the data collection methods to include individual interviews conducted via Zoom video, supplemented with a photo elicitation activity and document review. The change in the data collection methods may have affected the findings for this study. However, seeing that this case study centered on the holistic well-being of professional staff, it only made sense that the health and safety of the participants, researcher, and other individuals took priority. In addition, the University of Georgia's Institutional Review Board was not approving in-person research at the time I was collecting data, thus, another reason to conduct the research study remotely.

### **Reflexivity**

As I engaged in data collection and analysis I remained mindful of my bias, and I was cognizant of the fact that I was not approaching this research objectively (Preissle, 2008). I have spent my professional career as a practitioner in residence life, serving as a live-in staff member for much of this time. Maintaining privacy and minimizing harm to all participants was of utmost importance to me as I did not want anyone to experience negative ramifications in their work after participating in this research case study (Mertens, 2010). I recognize that taking care of one's well-being is influenced by the identities one holds, and thus, the lived experiences one has based on their identities (World Health Organization, n.d.). As a result, I believe there is one reality in which practices and protocols can be developed and applied that fosters equal opportunities for everyone in the workplace, and the way an individual engages and the extent

that they benefit varies based on individual circumstances. This belief does not minimize my role as a researcher. I believe a part of my role is to use the knowledge gathered through this research case study and provide informed recommendations that support the well-being of all individuals taking into consideration their social identities, which I do in chapter five (Finlay, 2002).

I also recognize the identities I hold as a white, cisgender woman influenced the way I engaged with conducting this research study, analyzing the data, identifying themes, and proposing recommendations. To remain aware of my bias given my positionality within this phenomena and social identities I hold, I used a reflexivity journal throughout this process that contained reflections on my experiences and insights as the study progresses (Patton, 2015). It is important for me to actively engage with my journal throughout the process both in making contributions, as well as re-reading it, contributing to the intentional analysis of the data collected (Preissle, 2008).

### **Research Design**

A qualitative case study methodology was used to examine how departments of residence life support the well-being of their live-in, professional staff. The use of case study as a methodology is preferred when the researcher wants to investigate, in-depth, a contemporary phenomenon within a specific context (Merriam, 1998; Stake, 1995; Yin, 2018). To constitute as a case study, “a how or why question is being asked about a contemporary set of events over which a researcher has little or no control” (Yin, 2018, p. 13). Additionally, a case study seeks to explain a set of decisions including why the decisions were made, how they were implemented, and the result of the implementation of the decisions (Schramm, 1971).

In this case study, I chose to use a holistic multiple-case study design as using multiple cases tends to yield more compelling and robust data versus using only one site as the basis of

my study (Herriott & Firestone, 1983). Little published research exists on examining holistic well-being of live-in, professional residence life staff. For this study, three sites were selected with the aim of literal replication, meaning that the data collected from each site predicts results similar to the others, to support in yielding compelling and robust data that is consistent (Yin, 2018). The design of this multiple case study was holistic in that the analysis of each case was conducted separately with similarities and differences being identified after analysis of each case (Yin, 2018). Literal replication was achieved in this research study in that more similarities versus differences were found in how departments of residence life support the well-being of their live-in, professional staff.

Yin (2018) identified five components that are important to the design of a case study. These components include the research question(s), proposition(s), case(s), logic linking data and the proposition(s), and criteria for interpretation of the findings (Yin, 2018). The research questions and proposition for this case study were identified in the introduction of this chapter. The case, examining how departments of residence life support the well-being of their live-in, professional staff, was bounded to draw a connection between the purpose of this study and the research questions and proposition (Yin, 2018). In bounding the case, I was able to remain focused on analyzing the data as it pertains to the phenomenon (live-in, professional staff) within the context of where they work (departments of residence life) (Yin, 2018). While proposition(s) are not necessary to use case study methodology, identifying a proposition and rival proposition can only strengthen the case study (Yin, 2018). As a proposition and rival proposition were identified, consideration was made as to how the data collected was used to support or negate the proposition. Pattern matching, explanation building, and cross-case syntheses were all analytic techniques that I used in the analysis process (Yin, 2018). Finally, identification of rival

explanations is crucial to determining the strength of the case study finding (Yin, 2018). Rival explanations serve as criteria for interpretation of findings, thus rounding out Yin's five components of research design.

This case study consisted of multiple parts. The following sections discuss in detail the following components: recruitment, site selection, participant communication, Zoom video individual interviews, document review, and data analysis. A proposed timeline for the study can be found in Appendix A.1.

### **Sites**

To properly execute a case study, two levels of selection must occur where the first level of selection identifies the sites, and the second level of selection identifies participants within each site (Yin, 2018). The following sections will discuss the process in which selection occurred at each level.

#### **First Level Selection**

This case study was centered on examining how residence life departments support a culture of well-being for their professional live-in staff. After receiving approval from the University of Georgia's Institutional Review Board, I used purposeful sampling to recruit sites for this study. Purposeful sampling allows for the selection of "information-rich cases strategically and purposefully" (Patton, 2002, p. 243). This dissertation research study was endorsed through the Association of College and University Housing Officers - International (ACUHO-I), which meant that ACUHO-I sent my site participant invitation to all senior-level housing officers in the U.S. who were members of the association (see Appendix B.1). Therefore, sites that were selected for this study held ACUHO-I memberships.

The invitation that was sent via the ACUHO-I listserv contained a link to a screening questionnaire for directors of prospective sites to complete (see Appendix F.1). This questionnaire gathered information such as institution type, institution size, number of live-in professionals, staffing level of live-in professionals, and supervisory structure. This questionnaire was part one of my data collection methods as it provided initial demographic data shared at the bottom of this section. In case I did not receive responses through the invitation sent via the ACUHO-I listserv, I drafted an email to send to sites identified through snowball sampling method and who were members of ACUHO-I (Patton, 2012) (see Appendix B.3). I did not utilize the snowball sampling method.

Senior housing officers at twelve institutions responded to the questionnaire. I scheduled brief phone screenings with seven of the senior housing officers (SHOs) to further assess if their departments were situated to answer the research questions of this study (see Appendix B.2). Phone screenings were not conducted with the five other potential sites because SHOs did not respond to my email to schedule a phone screening, or they decided to remove themselves from consideration after submitting the questionnaire. Of the seven SHOs I spoke with, after reflection, two individuals expressed reservations in participating due to current issues with staff morale. This narrowed down the pool to five potential sites. I ultimately selected the three sites interviewed based on their described institutional commitment to supporting well-being of all community members. I sent a follow-up email to all sites that were not selected to participate in this research multi-site case study (see Appendix B.7).

**Table 1***Multi-Site Case Study Institutional Information*

<b>Type</b>	<b>Geographic Location</b>	<b>On-Campus Bed Count</b>	<b>Number of FT, Live-in RDs</b>	<b>RD Supervisor Titles</b>	<b>Number of RD Supervisors</b>
<i>New England University</i>					
4-Year Private (not-for-profit)	New England (CT, MA, ME, NH, RI, VT)	1,001-2,500	7	Assistant Director/Director (typically Associate Director, but vacancy)	2
<i>Northeast University</i>					
4-Year Public (not-for-profit)	Northeast (DE, MD, NJ, NY, PA)	5,001-7,500	3 (5 in non-covid times)	Director	1
<i>Southeast University</i>					
4-Year Public (not-for-profit)	Southeast (AL, AR, FL, GA, KY, LA, MS, NC, SC, TN, VA, WV)	5,001-7,500	9	Assistant Director	3

*Note.* Institution names are pseudonyms

### **Second Level Selection**

After determining the three sites I wanted to extend an invitation to formally participate in this study, I emailed each site requesting a time to discuss participation in the research study (see Appendix B.4 and Appendix B.5). After each phone call, upon verbally confirming their interest in moving forward in the research study, I sent an email (see Appendix B.6) to schedule a Zoom video interview with the director where we reviewed the informed consent, further discussed departmental staff eligibility, identified possible documents needed for analysis (another source used for data collection), and learned about the director's perspective of staff

well-being in their workplace (shared in more detail under Data Collection Methods). During my conversation with one of the sites (Southeast), we discussed whether it made more sense for the executive director or the senior associate director of the department to participate as the director participant in my study. We decided upon the senior associate director, who would likely hold the title of ‘director’ at most other institutions given their portfolio. I followed up each of my phone calls with an email (see Appendix D.1) sharing next steps and reminding them to send me applicable documents. This phone interview was the second part in the data collection methods.

Upon receiving the contact list of resident directors and assistant directors (if applicable) from each site, I emailed these individuals inviting them to participate in my research study and asking them first to complete a short questionnaire sharing basic demographic information (see Appendix B.8). Seeking diversity of participants, I examined the demographic data of participants and sent direct emails to eight resident director participants across the three sites and one assistant director at Southeast. This follow-up email asked them to sign up for an interview, and if they were a resident director, provided instructions regarding the photo elicitation activity, which was used as a tool to prepare them for their individual interview (see Appendix B.9). All individuals accepted the invitation to participate in the research study. I sent a follow-up email confirming the date, time, and Zoom link of our interview (see Appendix B.10). I also sent a follow-up email to all assistant director and resident director individuals who initially expressed interest in participating in an interview to share that I no longer needed additional participants (see Appendix B.11).

For the photo elicitation component that resident director participants engaged in, their selected images served as a discussion topic in their individual interview where they shared the meaning behind their images. I asked participants to bring pictures to their interviews

encapsulating the following questions: a) What/who helps me feel balanced on campus?, b) My [physical, social, and/or mental] well-being is affected by \_\_\_?, c) What/who contributes to me feeling burned out? The individual phone interviews served as another source for data collection. All participant demographic information, including that of the directors, is at the bottom of this section.

**Table 2**

*Multi-Site Case Study Participants by Institution*

<b>Name</b>	<b>Position</b>	<b>Approximate Years in Current Position</b>	<b>Approximate Years in Field</b>	<b>Race</b>	<b>Gender</b>
<i>New England University</i>					
Khloe	Director	Not shared	Over 15	Not shared	Not shared
Clare	Resident Director	5	5	White	Cis-woman
Katie	Resident Director	Less than 1	Less than 1	Asian-American	Cis-woman
Sean	Resident Director	2	2	White	Cis-man
<i>Northeast University</i>					
Emma	Director	1	13	White	Cis-woman
Magnolia	Resident Director	3	3	White	Cis-man
Taylor	Resident Director	4	4	White	Gender non-conforming
<i>Southeast University</i>					
Barbara	Director	10 (entire institutional experience)	Over 15	White	Cis-woman
Steve	Assistant Director	2.5	3.5	Black	Cis-man
Cathy	Resident Director	Less than 1	Not shared	White	Cis-woman
John	Resident Director	3	3	White (Hispanic)	Cis-man
Josh	Resident Director	4	5	White	Cis-man

*Note.* Participant names are pseudonyms

## **Data Collection Methods**

Case study methodology is unique in that it requires the researcher to collect data from multiple sources that will yield a rich and in-depth description of the phenomenon being studied (Merriam, 1998; Yin, 2018). To thoroughly execute case study research, Yin (2018) suggests using four guiding principles to significantly increase the quality of data collected. These principles are: use multiple sources, create a database to store data collected, maintain a chain of evidence, and exercise care when using electronic data sources (Yin, 2018). I kept these principles in mind while using four sources to collect data for this case study. The use of the database, chain of evidence, and caution of using electronic sources are discussed in the data analysis and validity and reliability sections. The following data collection methods were used for this study.

### **Screening Questionnaire**

I used a questionnaire to screen potential sites during the recruitment process (see Appendix F.1). I used Qualtrics, an experience management web-based software, as the platform for the questionnaire. The questionnaire asked participants to share their institution type, size, and location, number of live-in professionals, staffing level of live-in professionals, supervisory structure, and confirmation of interest from the director to participate in a phone screening if chosen to initially move forward in the study. The collection of this information was helpful in identifying potential sites that were likely to provide sufficient data for this research study.

### ***Phone Screening***

For institutional sites that qualified according to the questionnaire, I scheduled a phone screening with the department director to confirm accuracy of questionnaire and share anticipated study procedures in more detail to better gauge participant interest (see Appendix

B.2). From the phone screenings, I determined three sites to formally invite to participate in the study, sending the IRB informed consent form (see Appendix C.1) and a link to schedule a phone interview with each director. Upon confirmation that a director agreed to move forward in the process, I sent an email confirming our conversation, along with a summary sheet to prepare them for our time together (see Appendices B.6 and E.1).

### **Director Zoom Interviews**

I emailed the department directors to confirm their scheduled Zoom (video) interview (see Appendices B.10). The purpose of this interview was multifold. I inquired about institutional context, specifically the organizational framework in which the division and department operated. I also inquired about the director's perspective on staff well-being within their department and how it manifested in the workplace. A semi-structured interview protocol was used to guide this interview using Manning's (2017) bureaucratic, organized anarchy, and spiritual frameworks, along with the World Health Organization's (1958) definition of health to inform the development of the protocol (see Appendix F.2). More context regarding semi-structure interview protocol use in multi-site case study is described in the Zoom Individual Interviews section.

The knowledge shared by directors helped me better prepare for the individual interviews I conducted with the resident directors and direct supervisors. I also used this interview as an opportunity to remind the director to send staff names and contact information for the individual interviews and requested that they also send me relevant documents (outlined in the following section).

Using Zoom as the platform to conduct this interview allowed me to record the interview, with each participant's permission, to upload to the third-party transcription service, rev.com, for analysis. Zoom allowed for easy recording of the conversation.

### **Document Review**

One of the suggested sources for case study data collection is the use of documents since, as a society, there is a heavy reliance on keeping records, paper or electronic (Yin, 2018). Many types of documents can be used to provide insight relevant to the case and may also serve as a means to confirm other sources of data (Yazan, 2015; Yin, 2018). I asked the department directors to send me documents they believed were beneficial to the study. This included guiding documents such as mission, vision, and goals of the department, as well as staffing policies, an organizational chart and position descriptions, appraisal template(s), budget allocations that support staff either personally or professionally, event outlines, applicable emails, and institutional HR documents outlining employee well-being support. Additionally, I conducted a review of the department's public website, thoroughly examining the staffing subpage(s) to identify cultural elements, policies, practices, and recruitment resources shared that could have enhanced my understanding of the professional staff experience.

I also asked directors to share images of their campus environment to complement the photo elicitation activity I asked resident directors to participate in prior to their individual interviews. I provided them with the same prompts that resident directors were provided. None of the director participants chose to share images.

### **Photo Elicitation**

Photo elicitation is another technique one can use to strengthen the findings of a case study. Photo elicitation is more rarely used, but can contribute to a richer description of how an

individual processes and makes meaning of their experience (Harper, 2002). This is due to the fact that “images evoke deeper elements of human consciousness that do words” (Harper, 2002, p. 13). Pictures taken by participants can serve as a tool that reduces misunderstandings of events or experiences, lead to a new understanding or meaning-making of experience(s), and strengthen their overall memory (Harper, 2002).

It was fitting to use photo elicitation as an activity to augment the interview discussion for this case study as this research study was conducted remotely due to COVID-19, and I was not able to use direct observations as a data collection method. Rather than being analyzed as a separate data source, the descriptions and discussion of the images were analyzed as part of the interview transcripts. Prior to my individual interviews with resident directors, I asked them to take three pictures that captured how their well-being is affected or impacted by the department (see Appendix B.9). Participants brought these images to their individual interview where I asked them to share the significance behind the pictures they took. Ethics around the capture and use of imagery is important with photo elicitation, so I reminded participants prior to taking the pictures to ask for consent should they include photos of other individuals (Lapenta, 2011).

### **Zoom Individual Interviews**

Interviews are considered to be a very important source of information in a case study (Yin, 2018). Interviews serve as an opportunity to confirm the validity of other sources of information, including existing literature, while also seeking to understand an individual’s perspective and reality of the topic being studied (Merriam, 2009; Yin, 2018). To gather this information, use of a semi-structured interview protocol is recommended (Merriam, 2009). A semi-structured protocol allows for thematic questioning that focuses on specific areas of the topic, while also approaching the interview in a fluid manner (Yin, 2018).

In the director interviews I asked for a list of names and email addresses of resident directors and their direct supervisors, if applicable. I sent these individuals an email introducing myself, the research study, the informed consent form, and a sign-up form to schedule an interview time, stressing they are under no obligation to participate (see Appendices B.8, C.2, and C.3). I emailed potential participants after analyzing the participant demographics (see Appendix B.9). In this email contained a link to sign up for an interview. Once a participant submitted the form, I emailed them to confirm their interview time and shared a summary sheet to prepare them for our interview (see Appendices B.10, E.2, and E.3).

Each interview lasted between sixty to seventy-five minutes and a semi-structured interview protocol was used (see Appendices F.3 and F.4). Same as with the director interviews, I utilized Manning's (2017) bureaucratic, organized anarchy, and spiritual frameworks, along with the World Health Organization's (1958) definition of health to inform the development of my protocol. I used Zoom to conduct individual interviews which allowed me to record the conversation with the consent of each participant. I also used the video capability within Zoom for these interviews in an attempt to keep some face-to-face interaction which would have occurred to a greater extent if I was able to go to campuses and interview individuals in-person. It was important for me to be observant during the interview to pick up on non-verbal cues which I documented in the moment, reviewed at a later time, and made note of in the transcripts for analysis.

I asked each participant to select a pseudonym at the start of the interview. More information around the use of pseudonyms to protect the participants is shared in a section further below. I also used the beginning of the interview to review informed consent (see Appendix C.2 and C.3) and collect their verbal agreement. As mentioned, I made notes of any

nonverbal cues and added them to the transcript for later analysis. I kept recordings and transcripts on a locked computer. I destroyed all recordings upon completion of my research study.

### **Protection of Subjects**

For this case study, sites were assigned a pseudonym and individual participants selected their pseudonym. To provide this protection, I initially obtained approval from the University of Georgia's Institutional Review Board (IRB). Upon receiving IRB approval and completing initial screening of potential sites, I explained the research process to the director of each department I sought to use as site and obtained verbal informed consent before collecting data. Additionally, at the start of any individual interview, I reviewed the informed consent process with the participant before proceeding with the interview only after they verbally agreed to participate. At this point in the interview, participants were asked to select their first name and last initial pseudonym in case multiple participants select the same first name pseudonym. I assigned sites their pseudonyms to implement an extra level of protection in that I am the only one to know the specific site.

The use of pseudonyms for sites and participants is in line with following IRB's protocol for protecting human subjects (Patton, 2002; Yin, 2018). Additionally, readers of my study will have an easier time of following along and drawing their own conclusions based on experiences shared in chapters four and five (Yin, 2018).

Another layer of protection I used to ensure participant confidentiality is through protecting the recorded individual interviews. I used the audio record feature on Zoom where I sent the recording to be transcribed by a third-party transcription service, rev.com. Each transcription was returned to me in a Microsoft Word document to help make it easier for me to

check for accuracy and for participants to engage in member checking (more to come regarding this technique in a future section). I kept all recordings and original transcripts on a password protected computer, and a back-up of these files was stored in a cloud-based, password protected platform. All original Zoom recordings were destroyed upon completion of this study.

### **Data Analysis**

Utilizing multiple sources of evidence, along with engaging in personal journaling throughout the process, meant that I needed to be intentional and methodological in how I stored, coded, and analyzed the data I collected. According to Yin (2018), case study analysis is “one of the least developed aspects of doing case studies” (p.165). To aid in the analysis of the data I collected, I used ATLAS.ti, a computer-assisted qualitative data analysis software (CAQDAS), to organize and code data collected. This software was downloaded on a password protected computer that only I knew the password to. The use of ATLAS.ti allowed me to upload all interview transcripts and documents collected through other sources and maintain them in one database for this specific case study. Within ATLAS.ti, I used separate folders to maintain the data from each site. Within the site folders were subfolders containing interview transcripts, institutional documents, and participant observation documents.

As I collected relevant documents from directors, I uploaded these items to ATLAS.ti. I also transcribed each interview using a third-party service soon after each interview occurred. Upon receiving the transcription of each interview, I listened to each interview and read through the transcription. I sent each participant a copy of their transcript, excluding the non-verbal communication notes, to engage in member-checking (Patton, 2015). Participants had three days to check the accuracy of their transcript. After this window, I uploaded each transcript to

ATLAS.ti. I also uploaded picture images into ATLAS.ti as they were emailed to me by participants.

I conducted data analysis while simultaneously collecting data. By concurrently engaging in both of these processes, I was able to identify salient messages and emerging themes that informed questions asked and topics probed in the remaining interviews (Miles, Huberman & Saldana, 2014). For interviews, I read through each transcript once in its entirety following the completion of individual member-checking. I then read each transcript again, this time identifying units of meaning which were grouped under the applicable framework(s) or compiled in an 'other' category consisting of salient pieces of data (Merriam, 2009). The frameworks I used to group units of meaning were Manning's (2017) bureaucratic, organized anarchy, and spiritual organizational frameworks, while also being mindful of how the units of meaning fit within the well-being dimensions defined by the World Health Organization (1958) consisting of physical, mental, and social dimensions.

In addition to using ATLAS.ti as my case study database, I used Microsoft Excel spreadsheets as a method to track participant information and manage extracted data from ATLAS.ti in the form of codes, quotes, and observations. The participant spreadsheet served as a visual reminder while I engaged in analysis, detailing each participant's pseudonym, their institution, position title, length of time as a live-in, full-time professional, and other relevant demographics. This spreadsheet ultimately informed how I interpreted and made meaning of interview data. I uploaded a completed copy of this spreadsheet into my case study database.

I used spreadsheets to extract, code, and make meaning of data collected as my analytic strategy (DeCuir-Gunby, Marshall, & McCulloch, 2011; Merriam, 2009; Yin, 2018). Each of these spreadsheets were formatted similarly (see Appendix G.1). There was one spreadsheet

dedicated to each site, totaling three spreadsheets. A fourth spreadsheet was used to cross-analyze the data collected from all sites. In each spreadsheet, there were four tabs. Three of the tabs were specific to one of Manning's (2017) frameworks being used, bureaucratic, organized anarchy, and spiritual. The fourth tab on each spreadsheet was labeled as 'other.' On each of the tabs labeled with one of Manning's (2017) frameworks, I listed the three dimensions of well-being defined by the World Health Organization (1958). As a reminder these dimensions of well-being are: physical, mental, and social. Each dimension was listed in one column box at the top of the tab sheet. The 'other' tab was the placeholder for any data extracted that did not initially fit within a cross-reference of the frameworks. These 'other' tabs were revisited prior to cross-analysis to ensure they did not belong elsewhere within their individual spreadsheet. Focusing on within-case analysis first allowed me to identify themes specific to the site and differences in participant experiences (Miles, Huberman & Saldana, 2014).

The fourth spreadsheet was formatted differently to support thorough cross-case analysis of data (Yin, 2018). There were ten tabs on this spreadsheet (see Appendix G.2). Each of nine tabs represented a cross of two frameworks (e.g., bureaucratic & physical, bureaucratic & mental, bureaucratic & social). The tenth tab continued to serve as an 'other' catchall tab for any data points remaining in the 'other' tabs on the three site specific spreadsheets. In column A of each tab, I added the applicable column of data from the site specific spreadsheets. I then used column B, C, etc. to narrow down similarities and differences across sites. The organization of data in this manner supported a rich findings section (DeCuir-Gunby et al., 2011). Upon completion of this spreadsheet, I uploaded and stored it in my ATLAS.ti case study database. I also created an aggregate summary discussing the themes and recommendations from all sites that was shared with all participants via email (see Appendix D.2 and D.3). This aggregate

summary was shared in lieu of the recommended individual site analysis reports to protect participant confidentiality (Yin, 2018). Sharing a summary with all participants allows them to understand how their experiences align with others, and potentially learn of recommendations they may want to consider implementing within their department.

I used the case study theoretical proposition and rival explanation to support in analysis, too (Yin, 2018). My theoretical proposition was that the organizational frames in which a department operates influence the perceived well-being support that professional, live-in staff receive. My rival explanation was that a department's organizational framework does not influence the perceived well-being support that professional, live-in staff receive. Following my cross-case analysis, I identified specific findings that support my theoretical proposition or rival explanation.

### **Section Summary**

Through the analysis process outlined, my primary research question of “how do residence life departments support a culture of well-being for the professional, live-in staff?” was answered. Conducting initial analysis concurrently with data collection allowed me to determine if I needed to modify existing questions or include new questions that might have led to a more thorough response to how departments support well-being. By focusing on within-case analysis, I was able to identify whether and how singular departments support well-being through applying the organizational and well-being frameworks to identify specific examples. In my cross-analysis, I respond to my research question through applying the frameworks to identify themes and ultimately inform the recommendations I propose in chapter five.

## **Validity and Reliability**

In constructing the design of this research study, much consideration was given to how the four tests of logic were used to ensure this research study produced quality findings (Yin, 2018). These tests, construct validity, internal validity, external validity, and reliability, are common across much qualitative research; however, different terminology is used dependent upon the methodology utilized (Patton, 2015). As Yin (2018) was used as the methodologist approach for this case study research, his test terminology was utilized. I will explain how I incorporated the four tests in both study design and analysis.

### **Construct Validity**

Construct validity is the ability to develop operational measures that are effective in collecting data that limits the influence of the researcher's subjectivity and is able to produce results that reflect the true nature of the topic being studied (Flyvbjerg, 2006; Yin, 2018). To increase construct validity, I used multiple sources of evidence, as detailed in the data collection methods section, and a chain of evidence by matching specific concepts identified with existing literature and other sources (Yin, 2018).

Through using multiple sources of evidence, I was able to triangulate my findings, thus contributing to trustworthiness (Merriam, 1998; Yin, 2018). By using multiple sources to achieve data triangulation, I determined a single reality with the use of converged findings (Yin, 2018).

### **Internal Validity**

Internal validity seeks to "establish a causal relationship, whereby certain conditions are believed to lead to other conditions" (Yin, 2018, p. 42). Internal validity can be hard to ensure in case study research as the researcher is forced to make inferences based on the multiple sources of evidence, particularly the sources involved in document review where the researcher has

limited knowledge of the context and circumstances informing the creation of the documents (Flyvbjerg, 2006; Yin, 2018). To increase internal validity, I engaged in explanation building and addressed rival propositions, previously shared, in my analysis. Explanation building identifies causal sequences and identified “how or why some outcome occurred” (Yin, 2018, p. 179).

### **External validity**

External validity demonstrates whether results are applicable beyond the sites examined within the specific case study research (Yin, 2018). External validity is dependent upon a well-defined guiding research question, along with the use of replication logic which involves intentional selection of sites that mimic similar results (Yin, 2018). The research questions used to guide this study solicited robust and similar responses across sites. Additionally, the sites selected had enough similarities which allowed for similar results to emerge.

### **Reliability**

Reliability is achieved when data collection procedures are made explicit in a way that allows for another researcher to produce similar results if using same procedures (Yin, 2018). To increase reliability, the protocol for this case study has clearly been outlined, a database was utilized to maintain and aid in the analysis, and a chain of evidence was documented (Yin, 2018).

### **Conclusion**

This chapter details the methodology for this case study. The chapter began with a review of my research questions, why case study is the preferred methodology, and the influence of COVID-19 on the study design. An overview of the proposed study design was shared, going into detail of site selection and providing an explanation of the data collection methods to be used. Inserted within this section was a reflexivity statement. This was done intentionally as my subjectivity informed how I engaged in data collection. Following the data collection methods

section, a summary of how I analyzed data collected was provided. Details regarding the protection of subjects and how constructs of validity and reliability were used in the analysis of data rounded out the chapter.

## CHAPTER 4

### FINDINGS

Due to COVID-19, I completed a remote multi-site research case study. I went into data collection recognizing that I might not collect as rich of data as I would if I was able to conduct my site visits in person. Data collection for this research study began eleven months after the U.S. had first gone into lockdown in March 2020. For residence life staff working in higher education, the past year consisted of working either remotely, in-person, or in a hybrid approach. I knew this from having conversations with colleagues at other institutions and paying attention to posts made on student affairs-centric Facebook groups. As such, I went into data collection unsure of how participants might engage, particularly recognizing the impact of Zoom fatigue and the exhaustion of living in a pandemic for close to a year, while managing student housing on a college campus. I was surprised by how easily participants opened up and shared honestly and vulnerably about their experiences of working in residence life. Some participants entered the conversation with trepidations, some participants got emotional when sharing their experiences, and another participant described the interview as being “cathartic.”

In the analysis process many themes across sites and participants’ experiences emerged resulting in being able to answer the question which guided this multi-site research case study, which was:

- How do residence life departments support a culture of well-being for their professional, live-in staff?

Three supplemental questions were asked to help provide a robust response to the primary research question. These questions were:

- What practices do departments currently implement to support the well-being of their professional, live-in staff?
- How do senior departmental leadership perceive the support they provide to promote a culture of well-being of professional, live-in staff members?
- How do professional, live-in staff perceive the support for their well-being from departmental leadership?

This chapter shares the findings from the data collection and analysis methods used to answer these questions. My primary data collection method was individual interviews, supplemented by a photo elicitation activity and document review. Resident director participants all participated in the photo elicitation activity where they were asked to share three images that answer the questions of: a) What/who helps me feel balanced on campus?, b) My [physical, social, and/or mental] well-being is affected by \_\_\_?, c) What/who contributes to me feeling burned out? Within the semi-structured interview protocol was a question that asked participants to share about the three images they selected and why they chose them. All participants, on their own accord, answered the prompts shared above, attaching one of their images to each question. For most participants, what they shared as it related to their images was similar with their responses to other questions throughout the interview. In other words, their images supported the experiences they were otherwise sharing.

Document review was another method used to inform my findings. I asked the department leader to share with me documents which might be useful in better understanding how a culture of well-being is cultivated for professional staff. Emma at Northeast and Barbara

at Southeast both sent me documents that included department mission and vision statements, along with professional development plans and staff expectations. Emma shared resources related to *Flourish* – a holistic well-being initiative aimed at providing resources and support to all community members (students, staff, and faculty) as it relates to taking care of oneself. Khloe at New England did not share documents. For all three sites, I did cursory internet searches to find any additional supplemental documents or information that might help in answering my research questions. Through analyzing the documents shared and found online, I determined that most were aimed at creating environments and promoting ideas of self-authorship for students specifically, which makes sense given the intended population that institutions serve. The professional development plans and staff expectations hinted at taking care of one's self, but largely focused on developing professionally and how staff should perform within their roles (e.g., expectations around email response, dress code, use of office hours).

Within the individual interviews, participants shared rich, narrative descriptions of their experience of cultivating or contributing to a culture of well-being while taking care of themselves. Therefore, the units of meaning shared in this chapter will be encapsulated in paragraphs instead of phrases. The decision to use paragraph format to share findings is because of the complex nature of this research study of seeking to understand both individuals' attitudes, behavior, and perceptions of how they maintain their own well-being, and how a culture of support for staff well-being is cultivated within the department, given the work responsibilities and environment in which resident director staff live and work.

I will first share a within-case analysis for each site, followed by sharing the analysis across all three sites. Within each site analysis section, I will provide relevant institutional context before sharing the findings grouped by each of Manning's organizational frames (2017)

used in this research study's framework. For reference, the organizational frames used included Manning's bureaucratic, organized anarchy, and spiritual frames. At the end of the within-case sections for Southeast and New England, I will share an analysis of additional findings that were prevalent to the site, but did not fit within any of the organizational frames used.

Following the sharing of within-case findings, I will conclude this chapter with the cross-case critical analysis. Similar to the structure of within-case site sections, I will structure the description using the organizational frames, followed by a general analysis section. The cross-case analysis will contain themes that showed up across all sites, along with a synthesis of the perspectives shared by the department leaders who participated in the research study.

Additionally, the cross-case analysis will provide a description of how participants practice self-care and holistic well-being. Finally, for the purposes of this research study, the term 'resident director' applies to full-time, entry level staff who hold a master's degree and live on campus as required by their job. The term 'director' applies to the senior most department leader who participated in the research study at each site.

### **Southeast University**

Southeast University, one of the three participating sites, is a four-year public institution in the southeast region of the United States with an on-campus bed count between 5,001-7,500. At Southeast University, I conducted video interviews with five residence life staff members over the course of a two-week period in February 2021. I met with the senior associate director, an assistant director, and three resident directors. Each interview lasted between 60-80 minutes. The senior associate director provided me with various departmental and institutional documents, which included departmental governing documents (e.g., mission, values, vision), professional development documents (including university HR practices and departmental structural

documents), departmental manuals (e.g., staff, crisis response), and supervisory expectations. All resident director participants participated in a photo elicitation activity which was discussed within their individual interview.

At Southeast, participants were mostly willing to talk freely and share their stories. Barbara and Steve, the director and assistant director respectively, took their role seriously in cultivating and supporting a culture of well-being for their live-in staff. Both individuals described how they value forming relationships with staff, getting to know them as people first, staff members second. Barbara and Steve provided many examples of how they role model healthy living to the live-in staff and actively start conversations that inquire into how live-in staff are taking care of themselves. Resident director participants acknowledged their appreciation for Barbara specifically, sharing they value how she role models work-life integrative practices and takes the time to invest in them as individuals. It was evident that Barbara and Steve cared deeply for those that worked in the department and they truly valued their staff members, while also recognizing barriers in place at the institution and within the work responsibilities of resident directors that make it harder to create a culture of well-being.

Cathy, John, and Josh, the three resident director participants, also had much to share during their interviews. For Cathy and Josh, there was clear overlap in many of their points of tension with the work required of resident directors and similar appreciation shared of the collegial relationships fostered within the workplace. John provided a slightly different perspective, focusing more on tension with informal and formal policies and practices that influence staff well-being (e.g., apartment size, dress code). While he valued many of the relationships he had with colleagues, John said he did not spend much time with the collective

resident director cohort given his family dynamic, thus potentially influencing his perception of the culture.

### **Bureaucratic Influences: “Last to Know...First to be Expected to Do”**

Institutions in the United States are adopting more bureaucratic principles in recent times to support in the daily operations in an attempt to provide a more solid infrastructure for their employees and customers (e.g., students) (Manning, 2017). At Southeast University, resident directors vocalized feeling like a “cog in the machine,” not having their opinions taken seriously by leadership, and feeling as though they are disposable, both given their position term limits and the perception that they are easily replaceable because of the influx of new professionals entering the job market each year. In addition to beginning to form their professional identity, they also find themselves navigating what it means to work for a large institution which embraces bureaucratic principles. Between these two constructs (forming identity and navigating a bureaucratic institution), they find that their work is at times confusing, as well as unnecessarily hard and stressful. As Josh, one of the resident directors, expressed, “(you’re the) last to know something, but the first to be expected to do the thing you just learned about. And when you feel jerked around in that way, it makes you feel like you're unable to plan.”

Complementing this feeling, of being the last to know and first to act, is navigating placement within the hierarchical order at Southeast University. Resident directors spoke of their experiences both within the larger division of student affairs and within their department. Cathy, a resident director, understood why entry-level staff are not always included in senior-level conversations initially, but believed there is merit in presenting ideas to resident directors before asking them to implement a specific initiative or policy. In summer and fall 2020, when institutions were planning their return to campus plans amid the COVID pandemic, there was a

perception of a lack of care from senior administration as it related to the safety of resident directors in implementing the COVID-safety protocols in the residence hall. Cathy noted:

I get why...they leave us out of things, and that's because we don't understand their level of things, and that's 100% true. Just as much as they don't understand us, we don't understand them... [The] stakeholders that go into all of the VP-type decision making that then gets trickled down. But, at the same time, take the time to explain it to us so that we can work within those parameters. Because, if you say, "Okay. This is what needs to be done. This is the expectation we're working with. How can we do this in a way that's safe for you all?" great. Now, you have nine minds at a table who want to work with you because you are involving us in this decision to make it a better experience for everybody.

However, this experience was not isolated. Cathy, Josh, and John, another resident director, described the disconnect upper administration has when making decisions that directly impact the work and well-being of live-in staff even before COVID-19. When asked to reflect on his experience at Southeast and what issues that make it difficult to work at the institution, John stated:

The biggest difficulty has always come from the fact that the job doesn't mean a lot to a lot of people above me, and it shows in kind of the policies that they're not willing to change, that they're not willing to do this or that.

On a departmental level, resident directors learned early on in their time at Southeast that they must "serve their time" before having their opinion on large-scale decisions be heard and considered. At Southeast, a resident director served on-call for seven days at a time and may respond to duty calls even during the business day. In fall 2020, the volume of calls and response

needs increased significantly for the on-call person due to COVID-19. Cathy and other resident directors brought forward concerns about the workload of being on-call, coupled with also needing to work in their own communities during the day, to a weekly departmental meeting to explore how to balance the work more equitably. Cathy said:

Each of us...gave an update related to, "Could we look at doing this more permanently or adding a way to balance out the call volume since this is likely to continue?" And it was like, "We can look into it" was the response. All three individuals who had made these statements were folks who were new to the university... And then, someone who has been here [for a few years] made the same suggestion... and so, then, our leadership team was like, "So, we decided that this now needs to be a thing based off of this person's situation." It's like, "Did you not hear the pleas and all of the begging during the staff meetings?"

Josh also talked about, as a senior RD, how his role on the team has evolved over the past four years:

So my role has fully flipped, to early on, my voice was heard, but what does it matter, to now I feel like when I share something or speak on something, I have this perceived power of having been here the longest.

The perceived power of when a resident director is able to influence departmental decision-making has an impact on motivation. Cathy, in her first year at Southeast, discussed the impact she experiences when mid-level and senior leadership dismiss her ideas or questions regarding policies and practices.

"You've not been here for a whole year, even. How would you know any different?" kind of mentality, which, for me, that has impacted my motivation to bring ideas, to make

suggestions, and to be a participant in the workspace versus just someone who goes through the motions.

Josh discussed going through the motions, or being a cog in the machine, when it comes to gaining professional development experiences outside of residence life at Southeast.

So if I wanted an experience, if I wanted to go to the conduct office or I wanted to do something for our dean of student's case management to further my professional development, often you're told, "No, that's not really in your purview, or you don't have the experience to do that." But a year down the road, when...CARES Act funding gets approved and they need someone to approve student requests or when the conduct office is short-staffed, then all of a sudden, I have plenty of experience and I'm asked to help out or expected to help out. There's a feeling of you're needed when you're needed and you're expected to help out, but it's on their terms, not yours.

In addition to being viewed as an employee who can support across the institution when needed, all resident director participants remarked the feeling of being disposable within their department, whether it was to the lack of inclusion they have as an entry-level professional, the fact they are easily replaceable, or because of the term limit imposed on resident directors. In reflecting on his experience at Southeast, Josh stated:

When you're at your on-campus interview, they tell you, "Hey, it's five years." And that's our director. That's his rule. I don't know the context for it. So what's funny is when I took the job, I was like, "Oh, I'll be there two years at most. Who cares about this five-year cap?" But I've liked it so much more than I expected, and I've stuck around. So yeah, it's sad... It reminds you of...your feeling of being disposable. I mean, you're basically a MacBook. You have a lifespan of about five years, and then we're going to replace you

with a newer model. And I've seen really amazing [RDs] get to their five years and they still had something left to give and they were still doing good work, and they had to go... There's a real feeling of ... This isn't a word, but disposability... And you can tell when you're in a more transient role that your opinions or your thoughts are a bit less value. And I always feel kind of aware of that. I could leave this job tomorrow. They would be fine. I'll be replaced. And I think that shows up a lot in how ... not how I'm treated, but how the concerns of a [resident director] are responded to.

Yet despite the feelings of being disposable and having a lack of influence in decision-making processes, all resident director participants spoke about how much they enjoy the people they work with and the work they do with students. For these participants, relationships and the scope of work provided them value and meaning despite bureaucratic challenges they navigate on a regular basis.

### ***Demands of Work Are Not Conducive to Supporting Staff Well-being***

Across all interviews with staff at Southeast University was the consensus that work in residence life is demanding, stressful, and, at times, chaotic in comparison to perceived work in other areas of student affairs. Josh highlighted how common it is in the field to ask staff to refrain from taking vacation or personal time during the months of July and August while departments train professional and paraprofessional staff, and conduct move-in of all residents. Josh described how he advocated for a long weekend away to attend a good friend's wedding during August, and still did some work during the weekend. In Josh's words, "I have a whole life outside of this job, and you can't just shut me down for eight weeks because it's busy." And I was so frustrated. I was like, "You really don't see me as a person. You see me as a worker."

Josh, and others, acknowledged that there are parts of working as a resident director which are unavoidable, and they knew these commitments when they accepted their position. Extended periods of training, duty, late hours spent at programs, and the investment in supervising and supporting RAs are all aspects of the RD position which do not always fit within a 9am-5pm work schedule. The part of the work that is more exhausting than anticipated is the level of care and response provided to students in distress. Resident directors are the first responders, bearing the brunt of challenging work in supporting students experiencing suicide ideation, depression, sexual assaults, and other high-level incidents. The rise in mental health needs among college students in recent years contribute to RDs supporting students in this regard more frequently, thus impacting the well-being of resident directors. As iterated by Cathy,

I think the crisis part of housing and serving on call has a huge role with the burnout ... I say that because it often gets put on on-call staff to do everything. It just seems so often that people are so willing to allow people who are live-in on-call staff members to [have their safety put] at risk...because, "We need someone to be there."... Yes, we need to have safety on campus, we need to maintain the students' well-being, but "What about ours (resident directors)?" kind of thing.

The perceived lack of care of RDs well-being is not intentional. Barbara, the senior associate director at Southeast University, reflected on her experience in the field and how she strives to create a supportive environment for her staff:

I think our field does not cultivate it (wellness). We talk about it, I mean, but especially when I started, [over 15] years ago, it wasn't really talked about. It was more like a don't be a clock-watcher, you do what needs to be done, you don't complain, this is housing, you have your housing taken care of and your meals, this is how it is. And that's how it

was. I didn't work in any negative work environment, but it did set up a lot of anti-wellness behaviors in me. So, as I have progressed in the field, I have realized the importance of setting that tone and that culture, even if it's just me saying, "Hey, take some time," "Hey, thank you for all that you have done. Don't feel pressured to do this."

However, despite Barbara's efforts in creating a supportive culture, the demands of the various responsibilities within the resident director position still existed.

### ***Staff Benefits and Staff Policies Matter***

Staff across all levels reflected on the influence that salary, benefits, and staffing policies have on the experience of live-in staff members. For live-in professionals, there can be friction with inequity of amenities provided. Living in on-campus accommodations is an expectation of the live-in position, in part to serve in a duty rotation. However, a point of contention is the quality of accommodations provided, along with the fact that the provided housing accommodation is often seen as a part of the compensation package due to a shift in tax law (Internal Revenue Code, 2011). In order to avoid paying rent and income tax, provided campus lodging to staff members must exist on university-owned property, is provided as a convenience to the employer, and is a condition of employment (IRC, 2011). Once seen as a perk by many individuals to the live-in position, it now is seen as an obligation of the work. As Steve, an assistant director, said:

I think there's been a cultural shift in what people want for live-in positions. When I was in live-in, I didn't care... I just said, "I don't have to pay rent? What? Sign me up." ...There is definitely a culture shift now. [Resident directors] are coming in ... I had an [RD] tell me, "I think I deserve more." I was like, "Oh, interesting. Tell me more about that." "I think deserve more amenity. I deserve a better place. I deserve a bigger room. I

deserve ... " She listed these things. I'm being open about it, but in my mind I'm like, "If had your apartment when I was in housing, I would've been thanking God I had a place to live for free." Don't get me wrong. I was blessed to have some great apartments in live-in positions, and some weren't so great. But each time I was grateful and I didn't complain.

For Steve, the requests for more amenities came across as demonstrating a lack of gratitude and potentially entitlement, while resident directors offered a different perspective. John believed that if required to live where you work, then employers should "do everything you can to really help people want to be here," particularly as it relates to apartment and other amenities. John acknowledged the shift in perspective over the years:

I would say that, once upon the time before the job is what it is now, there was this feeling of thankfulness that you received an apartment along with your job. And so those who grew up in that way, and they had the apartment and it was perfect, and they weren't minding of all the restrictions that they had. They are the ones that are, I would say in power now, or however you want to look at it. But this thinking about what wellness looks like, that's changed. The way that people are has changed.

One way the culture has shifted around staff apartments is around the equity of size and amenities within apartments. John, who lived in a newer building with a more updated staff apartment, talked about his experience in his previous apartment:

People fill the space that they have... The closets that I have are very small compared to ... coworkers who [have] walk-in closets, [and] there was nowhere for me to put my stuff. One time the maintenance director came into our apartment and he essentially was like, "You have a lot of stuff." And it's like, "I'm married and I'm going to have a kid soon, and this is one of the smallest apartments on campus."... That's when my bitterness

started towards the fact that I'm required to live on... There's no choice, right? There's a difference between required to live on campus, and you can live on campus if you'd like, and that's a benefit that we will provide for you.

In addition to apartment sizes, additional benefits that may coincide with living where you work also matter. At Southeast, a lack of a pet policy that permits staff members to have pets created dissonance among those living in, with those in leadership positions recognizing that not having a policy that permits staff to have pets influenced satisfaction of experience and who they are able to recruit into the position. Barbara spoke about how the lack of a pet policy has influenced candidates not to accept the position, while resident directors noted how they have navigated the system so that they can have pets. For Cathy, being able to work with the institution to secure emotional support animal (ESA) status for her dog has tremendously helped her well-being, but came at a cost:

I don't want her [my dog] to be registered as my ESA because I feel like while, yes, I need her, I truly would struggle without her, I feel like so many people go that route, and it leaves a bad taste in others' mouths that I don't want to be part of that stigma, if that makes sense.

Both Steve and Barbara empathized with resident directors' frustrations with seeking ESA status for their animal, and also explained how they advocated on behalf of the resident directors. Even the resident directors acknowledged they were aware it was a decision made much higher than Barbara and felt frustration toward those individuals and not necessarily departmental leadership.

Finally, in addition to housing accommodations and staffing policies mattering, so does salary compensation. A couple of years ago, in light of the potential passing of the Fair Labor Standards Act (FLSA), some institutions chose to raise the salary of their resident directors close

to, or to, the threshold of \$47,500 (Reynolds, 2019). At Southeast, they chose not to, and leadership recognized that their low salary influences who decides to accept the resident director position, as well as influences pay satisfaction of those who currently hold the position. While John expressed a higher salary would motivate him to do better work, Barbara provided the following rationale of why Southeast pays what it does:

I'm like, we are paying live-in staff \$47,000 a year, and they already have a meal plan and they have no commuting, they have no utilities? They have professional development. They have all of these things. I mean, they're going to be set up for disappointment at the mid-level. We start at \$37,600, and then they have the opportunity to make up to \$40,000.

Accommodations, staffing policies, and salary all influence aspects of staff well-being. For resident director staff at Southeast, having equitable housing accommodations to their peers, being able to have pets that live with them, and a salary that they can comfortably live on all positively impact their sense of well-being and satisfaction.

### **Organized Anarchy Influences: “Look at [the Job] as a Lifestyle, and It is Much Easier to Be Happier”**

In 2018, ACUHO-I issued a charge to convene a task force whose work was to explore the roles of resident directors and resident assistants given the “changes in student demographics, evolving trends in student issues, diverse institutional environments, and a more complex society” (ACUHO-I, 2018, para. 1). In interviews with staff at Southeast, it was apparent that the lack of continuity in their work and the changing needs of students created chaos in their daily work. When external forces (e.g., COVID, federal laws) arise, this adds to the feeling of chaos because these external influences can quickly change the course of work that staff do to support

and serve students. Josh talked about his desire to further his development in other functional areas, but was frequently turned away because it was outside his skillset or purview. However, as previously described by Josh, when there is an urgent need, he is asked to help out, lending to the idea that “you're needed when you're needed and you're expected to help out, but it's on their terms, not yours.”

While resident directors understood that sometimes last-minute needs arise, their frustration is rooted in the perception that because they live on, coupled with a lack of understanding of what their job actually entails by campus partners, they often get delegated or assigned tasks that fall within the ‘other duties as assigned’ within their position description. To a certain extent, this delegation of work might be occurring due to the fluid participation common within divisions of student affairs (Manning, 2017). Barbara acknowledged the importance of transparent communication with resident directors when directives are given for additional or new work. While sometimes there is no negotiation, Barbara shares with them when she has pushed back on decisions made regarding work requests from those in positions above her. Barbara said:

I also try to highlight for them the times that I have said, "No, we're not going to do that," or "We're going to hold off on this," so that they know that they do get some wins, because I used to not share that, but then I realized that they just thought that I was never filling their cup, I was always taking from their cup... I thought, "Oh, I'm just being humble. I'm not going to share with you the things that I have done on your behalf." But I think that that's important for them to swallow those decisions a little bit easier.

Across the resident director participants, serving on-call is seen as the area of their work where many additional responsibilities are added, creating work for them outside their traditional 9am-

5pm work responsibilities. In Cathy's reflection of serving on-call at Southeast, she noted how the retirement of a front desk receptionist resulted in a significant amount of the work being placed on the RD serving on-call. Typically, calls during business hours get routed to the housing main office, but once the receptionist retired, calls were routed to the RD on-call phone 24/7. RDs were expected to answer these calls, in addition to continuing their other on-call responsibilities, and also performing their assigned work during regular business hours.

### ***Job is a Lifestyle***

Recognizing the demands of serving on-call and the additional hours of work it requires, the requests from other departments to support their work, and events that influence a change of work (e.g., COVID), participants acknowledged that it was important to recognize the job as a lifestyle as "you're really just weaving your work life and your personal life into one" according to Josh. Josh argued that if "you look at it as a job, you're going to hate it. If you look at it as a lifestyle, it's so much easier to be happy in it and understand it for what it is." While Josh enjoyed his work and his experience at Southeast, he acknowledged that he was beginning to realize he did not like the lifestyle as he once did and was contemplating leaving the field.

Barbara, with close to two decades in the field, recognized the importance of being able to integrate personal life into one's work life due to the chaotic nature of working in residence life. She stressed to her staff to find time to tend to their personal life during the day if they need to, since the work can often wait. Even Barbara reminded herself at times to "calm down. This is just housing. This is not the end of the world. We will get through it, because we always do." Steve, as a direct supervisor to resident directors, affirmed this with his direct reports, too. He consistently tells staff to "use your vacation and your comp days. Use it. Don't worry about this place."

While resident directors hear these messages, they often feel a disconnect between what is espoused versus enacted. During a busy on-call week, Cathy was finding that she barely had time to stop to eat a meal or have a little bit of downtime. The effect of the hectic nature of the week on Cathy was observed by someone in a senior leadership position, who attempted to support Cathy by asking someone else to step in to help Cathy for a bit. Cathy described the scenario as follows:

Our leadership expressed to someone else in leadership, "Hey. Can you take on X, Y, Z task so that Cathy can get a break and breathe a little bit, maybe, maybe get some lunch today for once?" and this person was like, "Yeah." And then, a couple hours later, that individual was like, "Hey [Cathy]. Can you take on the task that was just delegated to me?"

Did I handle the task? Yeah, because I was asked to, but it really rubbed me the wrong way and made me look at that individual a lot differently. And so, I think that was an experience of, "Hey. We're going to preach your well-being is important, but then we're going to put it back on you anyways," kind of thing. So, I was like, "Okay. So, my well-being isn't important," kind of thing.

Similarly, John also expressed that while he was told to set boundaries, when he does not answer his phone after hours, he feels he has to justify why he did not answer.

I believe the idea that I must always be able to be reached at a point a time, while it's not mandated, it's kind of, "why didn't you pick up your phone?" Or "where were you?"... kind of thing. There's always the idea that we should be balanced, and that we should provide this boundaries, there we go, but if we're not available during a situation or a crisis it's always, where were you?

All participants acknowledged in some capacity how the field has evolved in terms of specific work, staff expectations, and staff's ways to approach work (e.g., willingness to work long hours, gratitude for a 'free' apartment). Woven into this is the notion that while we are very care-centric and pro-wellness for our students, we do not nurture this for our professional staff.

### **Spiritual Influences: "Family First"**

Most salient across all participant interviews at Southeast was the perception that people cared about one another, personally, and that positive, collegial relationships were core to having some level of job satisfaction and happiness at work with their experience. Along with valuing relationships, there was also an emphasis on creating sustainable practices that connect personal and institutional values such as taking time during the workday to tend to personal needs. When decisions were made that went against the notion of the person-first culture, they rubbed staff members in the wrong way (e.g., lack of a supportive pet policy). For the most part, the culture at Southeast embodied many of the characteristics of Manning's (2017) spiritual organizational frame in that staff members were encouraged to bring their authentic selves to work and it was embraced by leadership.

The culture at Southeast was cultivated from a top-down approach in the sense that their vice chancellor at student affairs is very committed to "family first." This idea of family first culture was mentioned to some extent in many of the interviews. Barbara took this mentality very seriously from speaking about the importance of taking care of yourself and practicing work-life integration when sharing staff expectations at the start of the academic year to role modeling this behavior. Barbara used an open calendar where she schedules in personal commitments, such as when she is going to the gym during the day or when she needs to tend to her family's needs during work hours (e.g., going to a school play). Steve, who directly reported

to Barbara, and Cathy, Josh, and John all reflected on this culture and expressed appreciation for the culture Barbara fosters that encourages them “to be a person.”

While it is encouraged to integrate personal and work life at Southeast, the work must still be done, which meant that sometimes that entailed responding to emails at night. Josh appreciated that the perspective of work-life integration is practiced from leadership in the department, too, because it provided direction in determining how to foster this integration for himself. He said:

Having people in your department above you role model good wellness is really, really important. [Barbara’s] famous for saying, "Sometimes, I do email between 8:00 to 10:00 PM because I had to go to dance with my daughter or I had to do PTA, or whatever it is." She's like, "I don't expect you to be on email at 10:00 PM. I don't expect responses at 10:00 PM. I'm working my job into my life the same way you are. And so don't take what I'm doing as an unspoken expectation."

And when you see it coming from above you, when I see her going to the gym from 1:00 to 2:00 PM, I'm like, "Okay, you know what? If she's going to do it, then I really can do it." Or if I see her, who's way busier than me, staying healthy with two kids and finishing a doc program and all of this stuff, I'm like, "You know what? There's really not an excuse for me to not be making better choices for myself."

While Josh receives inspiration from leadership to foster healthier habits within himself, Cathy disclosed that she struggles to take care of her well-being. Taking care of herself mentally, physically, and socially is not always at the top of her priorities, yet she found herself frequently telling her residents to make smarter food choices, to take breaks when working long hours, practice meditation, and engage in physical activity. Cathy said she understands the importance

of practicing holistic well-being because “without you functioning as a human, you can't function in other ways, and I tend to overlook that a lot with myself. So, I don't know the importance yet with me, but, with others, I do understand it.” She described the following antidote to illustrate her approach with promoting good well-being habits with her students.

When I was learning to drive, which has nothing related to wellness, my mom told me, "Do as I say, not as I do." And so, that is the mentality that I take into these conversations with students often, especially the RAs that I directly supervise, is, "Do as I say, not as I do," because they will see ... I pull up in my car, and they're like, "Oh. You got your 10th trip out for food this week," and it's like, "Don't judge me." They're like, "I'm eating out too," and it's like, "Make sure you're getting things that are good for your body," and they're like, "You're not," and it's like, "Do as I say, not as I do."

### ***Practices Matter***

In addition to promoting work-life integration, the department actively found ways to incorporate wellness into how they train and develop staff. Josh noted:

A couple years ago, I was in charge of all the meals for GA training, and the directive I got was, "We need to have healthy meals in GA training." My boss's boss was like, "I want there to be actual, nutritious food, even if we have to spend more money, because that's what's going to keep us alert."

For Steve, it was important for him to role model how he took care of himself, as was offering staff opportunities in the workday to participate in trainings that focus on cultivating a holistic approach to self-care and personal well-being.

I think as far as from the professional side of it and them being in that role, they have more learning opportunities about wellness from a professional standpoint and a personal

standpoint...If we're in a meeting, we're bringing in somebody to talk about your health and wellness, so you're going to get that information. Whether you tune into it or not in the meeting, that's up to them. But at least you are right there in front of the information. I think that's the biggest thing.... For the wellness for staff, it's more of, "Oh, so the department cares how I feel and my wellness, so they're bringing in somebody to talk about this. These are the resources I can have to get that sense of belonging, to get that mind, body, spirit, social aspect to help me answer those questions." That's the biggest difference I see.

In this regard, there was a disconnect between what leadership espoused versus enacted relating to well-being. As Cathy reflected in her experience of being delegated work that was initially removed from her workload earlier, there is a sentiment of “we're going to preach your well-being is important, but then we're going to put it back on you anyways,’ kind of thing.”

### ***Policies Matter***

Discussed, or minimally mentioned, in all interviews was the institution's stance on a pet policy for live-in staff. At Southeast, a lack of a pet policy meant live-in staff must register their pet as an emotional support animal (ESA) in order to have them live with them. Registration of their animal required showing a history of a counseling relationship with documentation of why an individual needs an ESA. Resident directors then had to submit this information to Southeast's accommodations office who determined if the ESA will be approved. Both Barbara and Steve discussed how they advocate for a pet policy repeatedly and have lost great candidates in search processes because of the lack of a pet policy. Steve said:

I just had one session with a supervisee yesterday that said, "My life would be so much better if I could just have my dog here." I'm like, "I know. I know it's hard. I can't change

it. We've asked. We've written proposals till we're blue in the face, but they won't budge on it.".... Some get to the point like, "I'm leaving."... [They want] those things that would help us have more of a living at home that makes us feel like a comfortable living space or environment. If they can't get those things, it doesn't feel like home to them. So yeah, they end up leaving and we lose good people because of that.

As described earlier, Cathy has a dog on-campus, but felt guilt around having her dog registered as an ESA preferring that she would “rather have a pet policy to just simply have her as my animal.”

In addition to a pet policy, some staff would like to see an expansion of the counseling services which are provided to all Southeast staff and faculty members through Human Resources. Employees are limited to the number of sessions they can attend, and there are other barriers in place, too. As Steve stated: “When you don't have counselors that look like you, that understand your history, your culture, your background, it's sometimes hard to connect.” This piece coupled, with a limited number of sessions, can make staff feel that the service offered is more of a recruitment tool or a service that is offered just to say it is offered. Cathy believed there should be a conversation that explores required counseling after managing significant crises. In terms of on-call support, after completing an on-call duty week, staff received a comp day to use the following week as a way to compensate for the extra hours worked. At the same time, staff desired more policies that support their emotional and mental well-being overall.

### **Sustaining Commitment to Job in Light of Evolution of Work**

As reflected in sections above, the job of resident directors, and arguably all residence life professionals, has changed significantly over the past two decades. National and world-wide events, along with a changing student demographic, has shifted the work of resident directors

from primarily community developer to a role more centered on crisis response, case management, and administrative responsibilities (Collins & Hirt, 2006). Participants reflected that COVID impact and student demographic changes (e.g., higher mental health needs) were at the root of why the change in work has occurred. While everyone who participated shared that they are in this field to serve and support students, the expectations around student support, chronic crisis incidents, and the feeling that your on-call week always ‘looms in the horizon,’ according to Josh, contributed to a feeling of tension with the work and exacerbated the feeling of burnout for resident director staff.

Barbara and Steve identified ways they worked to support staff and the importance of recognizing where resident director staff members are developmentally. When the topic of age proximity between college students and younger resident directors came up in my interview with Barbara, the conversation transitioned to discussing the similar characteristics between the two populations.

When you look at entry-level housing professionals, a lot of them, they're very high achieving. They're the leaders. They were the folks who were presidents in this organization or that organization, or they were RAs, and they're used to being very efficient in what they do, being praised for what they do. So, that translates into the entry-level structure of our field, that you have all these really high achieving and I also think really high anxiety folks who are willing to do so much to be noticed, to be seen as competent. And sometimes they need to be told, "It's okay to simply get the job done, and it's okay to leave at 5:00. It's okay to tell your colleague that you don't want to go to the happy hour they planned, because you are going to meet up with this community

organization that you have been a part of. It's okay for you to feel burnt out and feel like you can't give any more and to say that to your supervisor.

Thus, it was really important for Barbara and Steve to reinforce this messaging with their resident director staff, which is exhibited through them encouraging their staff to take the day, to use their comp and vacation time, and to remember that “this is just housing.”

For resident director staff, while frustrations around the work existed, Cathy, John, and Josh were clear that they love most of the work they do and the people they work with. For them, the value on relationships and community sustained them in many ways at Southeast, but the unrelenting nature of crisis response, the stress of managing high-level incidents while also doing the other parts of their job effectively, and feeling as though campus partners see resident directors as a catch-all employee to do the work contributes to their burnout and lack of ability to take care of themselves. As Josh ended his interview sharing:

If there is any grad out there who was like, "Should I work at Southeast," I'd be like, "Absolutely." You learn so much. There are opportunities to grow. You can make your experience whatever you want on campus. You can get involved with different offices. You learn so many crisis response. You get to chair committees. It's a great place to work, and I've had a great experience. I wouldn't still be there. My frustrations are less with Southeast and more what I have realized the field is, and that even a place that I love isn't insulated from that culture. And I think that's what's hard. If Southeast, a place that I believe in so deeply and whose leadership I really like can't rise above this, then who can?

### **Northeast University**

I spent three weeks collecting data from Northeast University during the months of February and March 2021. Northeast University is a four-year public institution located in the northeast region of the United States with an on-campus bed count between 5,001-7,500. I conducted video interviews with three residence life staff members: the director and two resident directors. Each interview last approximately one hour. After meeting with the director, she sent me departmental and institution-wide documents relevant to this research case study. These documents included the institutional mission, vision, and guiding principles; information relating to a university-wide well-being initiative; the departmental professional development plan; and the resident director position description. Both resident director participants participated in a photo sharing activity which was discussed within their individual interview.

At Northeast, all participants went into great detail sharing their experiences. Emma, the director, felt a strong commitment and purpose in creating a culture of care and support for her live-in staff. She reflected on the evolution of the work in her near twenty years of working in the field and was passionate about wanting to do her best in creating an environment where her staff was supported and able to take care of themselves, even if it came at the detriment of taking care of herself at times. Magnolia and Taylor, the resident director participants, were also easy to speak to but expressed initial apprehension in deciding to participate. They were concerned at the approach this research study might be coming from and shared that the work has been especially tough in the past year in terms of the COVID pandemic and “not feeling valued outside of the department” according to Taylor. Both Magnolia and Taylor had many experiences and thoughts to share as it related to their roles at Northeast. Magnolia and Taylor had frustrations with certain work responsibilities and perceptions of their role outside of their department. While at the same

time, Magnolia and Taylor valued the support their director, Emma, provides them and being able to work directly with college students.

### **Bureaucratic Influences: “We Can’t Let the Students Fall Through the Cracks”**

At Northeast University, increasing mental health needs of students and the demand to be customer service oriented, influenced by the larger culture around student and family expectations of college in general, direct most of the work that staff find to be contributing to stress, exhaustion, and overall burnout. Emma, the department leader, recognizes the exhaustion that her resident staff experience from being pulled in many directions. While she tries to create balance and encourages boundary setting, the pressure she receives from colleagues and supervisors can make it hard to “do the right thing” when it comes to advocating for staff. Northeast’s experience aligns with the characteristics of a bureaucratic organization, which include prioritizing the needs of an organization over individual needs, providing structure, and providing an effective service or product to customers, according to Manning (2017).

A couple of years ago, Northeast University experienced a spate of multiple suicides in one semester. A mid-size institution, the impact in the aftermath of these suicides was felt across the entire campus. One of the responses from the institution was the creation of a campus-wide initiative centered on supporting well-being of all community members – faculty, staff, and students. This initiative, called Flourish, is marketed as an initiative “anyone in the Northeast community” can get involved with to support fellow community members, but the work of support often falls to the staff members because “we can't let the students fall through those cracks,” said Emma, the director.

According to Magnolia, a resident director, the high level of support to students in crisis is often shouldered by resident directors, both full-time and graduate, and resident assistants.

While resident assistants might be first responders to a student crying in a lounge, graduate and full-time staff often get called first when a student is spotted in crisis in a public area or it is a situation involving suicide ideation, sexual assault, or relationship violence. Magnolia said that Northeast has “some really clear guidelines and protocols where we're getting that student connected to an on-call counselor” in many situations, and typically looping in public safety, too. For Magnolia, getting a call from public safety stating “we have a student who was found on the parking garage” was not entirely uncommon but was alarming given that was a “location of death by suicide for us a few times.” He calculated that this past year, he probably had “10 to 15 hours of on call pretty consistently” each week he was on-call. Magnolia declared he will take “COVID issues over the Title IX issues, domestic violence, mental health, but the time commitment has been incredibly, incredibly significant.”

To support with this scope of work, Northeast employed entry-level staff in other functional areas to also serve on-call. Similar to the resident directors, they lived in a residence hall so they can participate in the on-call rotation. However, for these professionals and even staff within residential education, serving on-call was often the part of the work that prompted them to resign. Magnolia shared:

I would say, we have been significantly short staffed for the bulk of my time at the institution from an on-call perspective. That has been difficult especially with COVID. There's a few different positions on campus that serve on-call and I would probably say that all of those positions become vacant as a result of the on-call process. It's not as a result of being an [RD or other entry-level coordinators] ...it's as a result of being on-call.

In my conversation with Taylor, another resident director, they also expressed concern regarding staff resigning due to the on-call approach and worried about the effects on staff morale. For the

resident directors and fellow coordinators across campus, the level of response the institution expected in terms of supporting students in distress largely influenced their satisfaction and commitment to their job and institution. Similar to resident directors at Southeast, Northeast resident directors enjoyed most aspects of their day job, but were feeling burned out by serving on-call.

### ***Mounting Work Coupled with Mixed Expectations Breed Fatigue***

During my conversations with Emma, Magnolia, and Taylor, it was apparent that the high level support and general crisis work significantly impacts staff well-being at Northeast. Additionally, the increasing amount of time spent behind a computer combined with an even more sedentary workday during COVID, since all meetings are virtual, fueled exhaustion and burnout among staff. Taylor identified this in their interview, sharing that the number of emails they received are “astronomical” and are all deemed “urgent” by the sender.

The department that Emma, Magnolia, and Taylor worked in focused specifically on residential learning; however, in the conversations it was evident that the learning work with students is often placed on the backburner to accommodate requests from other departments. Magnolia spoke about the significant change at the institution in the past few years, citing how it is important to first have “heads in beds” before one can implement a curricular approach or a residence hall association. However, for Magnolia being able to execute these developmental elements of the position excited him, but he was not able to due to the level of change, both departmentally and institutionally, along with the increased level of crisis. Magnolia summarized the past few years of change and crisis in this way:

We have rolled out a few new departments and divisions that we work really close with.

We have changed divisions. We have brought in a new dean of students and obviously,

with a senior level administrator is going to come with new vision and new ideas. There's been some changes in that regard. In the last year...we have a new director...[and] a new associate director. A lot of changes with all of that...All of that, just on its own, has obviously just been interesting to navigate and find out as we grow our student population, how do we best serve them as a department. [There] is a large emphasis on mental health at Northeast. Probably twofold, one, being dealing with a tough few years of mental health crises, specifically suicides, and the other is having rolled out over the last few years an initiative called Northeast Flourish which is basically our model for wellbeing. That is centered and focused on some of the dimensions of wellbeing.

From a director perspective, Emma acknowledged that there is a “dismissiveness of res learning” as it “is not necessarily as important as any of these other things that are going on right now.” Emma believed that this feeling is “not exclusive to this institution, rather it is a profession conversation decades old.”

With all these changes though, there is much to be desired in terms of collaboration among campus partners. Staff often felt like they were being asked to help and support other departments, which they were happy to do, but felt like the support was not always offered to them. While a small example, Magnolia discussed how poor interactions contributed to feelings of frustration and a sentiment that campus partners did not value working and supporting the residential life staff.

We just don't necessarily collaborate well with all of our campus partners. I don't know if that's for a lack of advocacy from our senior leadership, if it is just a systemic thing that's been rooted in the institution and these have always been our practices so there's no interest in changing them now. But [for example, one day] a student who's locked out I

needed to respond to because public safety didn't have anyone available. And again, this sounds smart and funny but on my drive to let that student in, I passed two security vehicles parked in two different parking lots just sitting in the lot, an empty lot. They're just hanging out.

It's those types of things where I wish that there could be greater collaboration between largely our department of public safety because we will get a call from them like, "Hey, we've had an officer waiting here for three minutes. Where is someone?" But we won't get a response for 15, 20, sometimes an hour or two for an officer to come out and assist with, again, a low level incident, not anything significant.

### ***Customer Service Mindset takes Priority***

While tending to lock-outs can be a common responsibility of on-call staff at most institutions, at Northeast there was a strong emphasis on also providing around the clock support to students who request help, regardless of reason. Both Magnolia and Taylor reflected on situations in which they have managed while serving on-call. Magnolia said:

We function very much so as a concierge service. And again, this is going to sound funny and it's really not meant to be like, "Oh, you only have two pillows in isolation housing and you want a third pillow and it's 10:30 at night. I have to drive over there and get your third pillow."

[I just wish there was] a little bit more of an empowerment to be able to tell a student, "Hey, this isn't an emergency. You're going to have to call back on Monday," and hang up that phone and not worry that that student is going to send an email that is going to go to the president's office that is then going to trickle back down to us in a like, "Why didn't you help this student?" way, which it often does because we're very

customer service based as an institution which, again, there's times I'm incredibly grateful for, that we put our students first, I just worried about what we're teaching our students about what they should expect.

Taylor also contemplated the purpose of the on-call staff, sharing the following:

I don't want a phone call that says me and my roommate are fighting about socks and we want to have a mediation tonight instead of waiting for the RD tomorrow, when they can do it to their office hours. I'm not doing that. So being able to say no, and I think that comes with experience, what are you allowed to say no to versus not? People in this department make it tough [to say no].

Taylor went on to declare “unless it's emergent, I shouldn't have to do it after five o'clock... We're not a concierge service.” At the same time, from Emma’s perspective, she recognized the external influences that drive some of these concierge-like service behaviors because “our students expect this, and that's not going away.” Yet, she believed we need to intentionally “build in structures that support the persistence of our staff members to do the work.”

Outside of after-hours requests from students, resident directors managed parental involvement in their child’s collegiate experience. Taylor spent an overwhelming amount of time on e-mail with many of the “urgent” emails coming from parents attempting to advocate on their child’s behalf. Due to FERPA, this required the RD to connect with the student to get a better understanding of the concern. Often the conversation with the student results in learning that the parent did not fully understand their student’s situation before advocating on their behalf. As a result, this created more work for Taylor and fellow RDs, who then needed to call back the parent and share the full context of the situation after receiving approval from the student. Instead of being able to focus on only supporting the student, there was now a level of parental

support to provide. Responding to ill-informed advocacy efforts, delivering a concierge service after-hours, and supporting other department's work detracts from the limited time RDs can spend on intentional educational initiatives that are already impacted by the significant support provided to students in crisis.

### ***Advocacy and Role Modeling Are Important to Feeling and Being Supported***

While the work that falls to resident directors can be daunting and tiring, role modeling of healthy work behaviors and being able to advocate for reasonable requests, such as work delegation and time off, help to mitigate some of these negative feelings. Both Magnolia and Taylor valued and appreciated their director, who modeled healthy work behaviors. Emma encouraged them to not work after 5pm, to tend to personal needs during the day within reason, and to use their time off. However, there was a disconnect between what Emma did versus the expectations of other directors Magnolia and Taylor worked closely with.

Taylor stated that they are a stickler for leaving work promptly at 4:30 pm (when their office hours officially end for the day). This habit was supported by Emma, but not by the other directors in their office. Taylor expressed:

They're here after hours when they don't need to be. I'll see a phone call come through, and I almost roll my eyes at it because I'm like, "Why are they calling me at 5:30? I'm not on call."

Similarly, Taylor observed that it is common for mid and senior level professionals to work even while on vacation. Staff at Northeast get twenty-one days of vacation per year, which is eligible for roll-over, but Taylor said that they experience internal conflict about using vacation days because of the culture around working and making up work when on vacation:

When people take off here, they still show up to meetings virtually, and they will say like, "You can still call me," when they're on vacation. So then you're like, "Why am I taking off? I'd rather not be using my time when I still have to be at this thing." I don't think we have to. I think it gets manifested that way because upper administration does the same exact thing. They don't role-model that well. So then it makes you feel anxious about missing a meeting.

The lack of strong boundary setting and role modeling healthy work-life balance sends mixed messages to the resident directors, who were still learning and deciding what work-life balance, or integration, means to them.

Being able to advocate for balance was a challenge at times for Magnolia and Taylor. Both described experiences they had of requesting time off during summer training and move-in. Taylor reflected on how they took a day off during summer training one year to tend to a personal matter and felt judged by colleagues for taking the day. Taylor further reflected on how much detail is necessary when sending an out-of-office email, sharing that they often feel they have to justify why they are taking a sick day despite being assured by Emma that they can send a generic message to the department stating that they will be out of the office. Emma strived to foster an environment where she tries to role model by "putting value in the things that they [resident directors] value" as a way to support encouraging staff to do things like take time off, go to the gym, or turn off email. However, Emma acknowledged that at the end of the day:

We're also getting pulled in these bizarre directions, especially now. Our profession is a service profession. Our customers are increasing their expectations. It's expensive.

Retention, drive, all of the buzzwords in our field just make it a really challenging thing [to support staff].

### **Organized Anarchy Influences: “My Supervisor...Say(s) All the Right Things” but Doesn’t Stop the Increasing Workload**

Providing thorough support to students in distress and engaging in a customer service-oriented approach meets the current needs and demands of this generation of college students, but came at a cost to the staff at Northeast who were facilitating this work. Staff members provided numerous examples of times when they were asked to work long hours or asked to help campus colleagues in ways that went above what is expected of them in their traditional roles. Fluid participation, according to Manning (2017), is a characteristic of organized anarchies that can describe participant experiences at Northeast because of the turnover of staff members across campus and a lack of institutional historical context and knowledge of the roles of specific positions. When asked why she decided to participate in this research study, Emma, the director, said, “This is an institution that does truly value the things that you're researching. They're just not doing a great job of showing it right now.”

The idea of espousing an ethos of care versus enacting an ethos of care for staff was salient among Magnolia and Taylor’s experiences. Both said that they felt very supported by Emma, whose approach and support was different than other senior-level professionals at the institution. Taylor, who previously described getting called after hours by other directors, also talked about work-life balance in this regard for themselves:

They'll call, and I'll be [at the gym]. "I'll get back to you at six o'clock." If I really need to follow up about something, it needs to happen that day. You'll hear from me after I'm done at the gym. I think that, of course, that's a weird dynamic because in most jobs, you shut off, and you come back the next day. But that doesn't happen in higher ed. So you have to kind of make a balance of what that looks like, especially as a live-on

professional. I think the expectations are that you live here. So the reason why you live here is to be able to follow up on things after hours, even when you're not on call.

Magnolia held a similar perspective in doing work after hours when reflecting on what it means to live-in with a spouse. He shared, "I might get a call at 6:00 or 7:00 at night even if I'm not on call and there might be a response that needs to happen." This idea that it is okay, to an extent, to do work after hours even when not on-call can contribute to feelings of exhaustion and burnout. Taylor recognized that this might not be normal in other industries, but views it as a part of the live-on experience.

Additionally, the demands of serving on-call contributed to weeks where a resident director may literally be working day and night without much reprieve from work. As both Magnolia and Taylor named, the demands of the on-call work was the primary reason for some staff to leave Northeast. The on-call team, comprised of resident directors and entry-level professionals in other offices, has continually been short-staffed the past few years due to the high turnover. When asked how this work could be better managed, Magnolia responded by saying:

I don't know that it's for lack of care but the support is essentially nonexistent in the sense that adequate support for what needs to be done can't necessarily be provided. What I mean by that is, you can, of course, be incredibly empathetic, incredibly effectively empathetic, and say all the right things, mean all the right things, but it doesn't change that I was on-call yesterday...I get home at 7:30 or 8:00 [for the day] and then I get a call at 10:00 for something and I have to go over to relocate a student for our isolation housing and then I'm back by 11:00. And then I get three or four calls in the middle of the night.

My supervisor or supervisors can call and say all the right things but they can't take the meetings that I have on my calendar the next day. I've had three meetings that got put on my calendar today since this morning that were not expected and that sometimes it's just a part of the work. They're important meetings.

Magnolia believed that part of the issue was with campus partners who “misunderstand our role of [being] an on-call professional” and viewed it in part as being a concierge service to students. Taylor believed that part of navigating this concierge service expectation is learning over time “what you can and cannot say no to.”

As a way to demonstrate care, resident directors sometimes received comp time for working busy periods, weekends, or holidays; yet at Northeast a running joke is determining when you can use the comp time, since many staff struggle “to find times throughout the entire year where we can comfortably and easily travel” according to Magnolia. Similarly, Taylor expressed that they question taking time off when they see senior leadership often respond to emails and attend meetings while on vacation. For resident director staff, this contributed to uncertainty of when to use their earned comp time, which eventually led to losing time earned since a staff member cannot cash out their comp time, like vacation time, when they leave Northeast.

### ***System is Set Up for Chaos***

The on-call responsibilities at Northeast wore on staff tremendously, from the significant support they are required to provide to students experiencing significant mental health crises to serving as a concierge service. As both Taylor and Magnolia discussed, the demands of serving on-call are at times tedious and result in late nights and long weekends. What added to the frustration was when there was a lack of support from public safety on simple but, in the eyes of

on-call staff, meaningful issues that arise such as lock-outs – a task public safety has the ability to support. Escalating the frustration and exhaustion of serving on-call is the structure itself at Northeast. When situations arise that necessitate additional full-time staff to respond, Magnolia and Taylor call the supervisory level above them, which on their campus is their supervisor, the assistant director. However, this person is retiring, so the structure is evolving, and COVID has also influenced who on-call concerns need to be elevated to. According to Taylor, all COVID related calls need to be directed to the associate vice president (AVP). However, sometimes the AVP directed the on-call staff to call the dean of students because either the dean might have more information relevant to the situation, or because the AVP may have to become involved in another capacity. As Taylor shared, “90% of the time, the OCCs (on-call coordinators) don't even call up anymore because we know what the protocol is,” but when they need to, there is at times a lack of coordination in response.

The on-call structure and responsibilities are not the only element that contribute to a sense of chaos in the work of resident directors. The system itself is arguably set up for chaos. As Emma stated:

It is so hard to be a caring leader, especially right now in this season of COVID, where that's all well and good but also do all of these things and do it with less staff, and do it with less money and less time.

This idea to do more with less money resonated with the resident directors, who talked at length about the fact that while they work in residential life, they are heavily involved in adjacent departments, helping to carry out their work (e.g., facilities, room changes, supporting in Flourish initiative). While Magnolia and Taylor saw much benefit in supporting this work, since it is important to student satisfaction and experience, it ultimately detracted from their work in

being able to develop and implement a curricular approach. They were stretched thin between their day jobs, increasing on-call responsibilities, and student demands, resulting in a lack of focus on the job they were hired for and contributing to an inability to sufficiently maintain a holistically balanced approach to their own well-being.

### **Spiritual Influences: “My Coworkers are Absolutely Family to Me”**

Throughout the phone screening with Emma, to determine if Northeast would make a good site for this study, and each of my interviews with Emma, Magnolia, and Taylor, it was evident that Northeast is an institution that cares deeply about its students, staff, and faculty members. Each of the participants described their appreciation and value for the other individuals they work with in their department. Within their area, it was apparent that they each cared for one another and invested time in their relationships of getting to know each other as a person first, colleague second. This value is consistent with Manning’s (2017) spiritual frame which emphasizes relationship building and creating an environment where people are allowed to bring their whole selves into the workplace.

The spate of suicides a couple of years ago forced the institution to reevaluate their values, and supporting the well-being of all of its community members is a value that now takes priority. While the *Flourish* initiative and other supports on campus do invaluable work in supporting students’ well-being, it was evident that there was more to be desired for staff support specifically, particularly since they are the individuals actively supporting students’ well-being through crisis response and their daily work in the residence halls. Emma stated how the institution “truly values” creating cultures of well-being but are just “not doing a great job of showing it right now.” Magnolia and Taylor felt support from Emma, but cited how behaviors from other directors send the message that there is not a collective sense of care for staff well-

being, particularly when resident directors receive non-emergent calls after hours. Additionally, as Emma shared in reflecting on working with students broadly, “people are also exhausted to the point of supporting students that they don't have the energy to support themselves at times.”

The experiences staff had at Northeast are not isolated to their institution. To various extents, Emma, Magnolia, and Taylor acknowledged that certain structures, responses, and challenging work issues exist at other institutions, too. Each of them enjoyed working at Northeast, valued their relationships with colleagues, and were committed to being “data-driven, theory to practice” educators in the words of Emma. They believed that people truly care for them at Northeast, but there is a disconnect between the espousal versus enactment of this support. Emma connected the lack of disconnect at Northeast to the larger field:

We need to model certain norms and ways of being in a workplace setting, whatever that looks like, right?... We need to re-evaluate how much blood we're taking from the stones that work for us, right? We can't keep doing this. Everyone has said that for years, right? ...If this is not the reckoning, I don't know what else is. This has to be the tipping point where we start really talking about like, "What is important in the work that we do? How do we value our time? How do we value our employees? How are we creating spaces where it is okay to say, 'I really do need a break' and not be seen as a quitter?" We need to also call out folks like, "It is not okay to be a martyr. There's no honor in that either."

### ***Having Work Relationships that Role Model Healthy Balance is Important***

Emma, Magnolia, and Taylor all conveyed how much they value having strong relationships with those they work with. While Taylor joked they refer to them as just colleagues, they also quickly clarified and talked about how her fellow RD colleagues are like family who look out for one another. Taylor said:

We're the group that has a meeting after the meeting. This time is going up, as soon as we get off something that is like sketch. Someone says something in a meeting, and everybody's on the phone afterwards, just from our small group to debrief like, "Okay. Well, how are we going to navigate this?"

Magnolia similarly referred to his colleagues as family sharing:

My coworkers are absolutely family to me. Some of them, especially the other [RDs], I have been incredibly blessed to be able to call those coworkers friends, to have them come to my wedding.

This camaraderie was clear from Emma's positioning in the department, too, and she found ways to invest in each of her staff outside of their work.

It's evident still in the team camaraderie that I see now. They genuinely like each other. They genuinely care about each other as people, way beyond the job. That is something that I think is cultivated... And I think that contributes to wellness, when you are at least working with people that you like within your kind of functional area.

One of my staff members is a reiki practitioner; encouraging them to go and further their training in that. One of my staff members is a recently newlywed; encouraging them to take time with their partner. My other one is recently engaged; encouraging them to do that thing, right? Like putting value in the things that they value, that is something that I strongly try to role model.

For all three participants, having strong relationships with their colleagues was something that added joy and satisfaction to their work experience and reinforced their commitment to Northeast.

Encouraging and role model healthy work-life balance/integration also supports in fostering good, collegial relationships. For Emma, it was important to create a culture where taking care of yourself and your needs come first:

In my department that I can control, I set that tone...[I] am validating the feelings of our live-in staff like, "No, you need to take time to go to the gym. No, it's okay to take a sick day even if you live on campus. If someone sees you you're not working, right?" So trying to normalize that in our language, and again the fact that we're not emailing. [I'm] not texting. [I'm] not expecting them to respond when they're away.

Resident director staff appreciated this reinforcement of a healthy balance and enforced it with the graduate resident directors and resident assistants they supervised. Taylor role modeled to their staff by coaching and doing what they tell their graduate resident directors to do:

I have four grad students right now that I directly supervise. I'd be the first one to advocate, if they're not in their office hours, please don't bother them because they're allocating their time in the way that they need to, to prioritize what needs to get done during their office hours. I feel like I need to role model that in order for them to be able to successfully complete their own jobs. So for [example], I tell my grad students I really tried to get out of here at 4:00, unless that we have something going on. Like today, we have in-service. So I have to manage my time differently.

By witnessing positive, healthy behaviors modeled by senior leaders above them, it made it more acceptable and a little easier for resident directors to also practice healthy behaviors in the workplace. In turn, resident directors were also able to effectively role model this to the student staff they supervise.

## New England University

I virtually met with four residence life staff members at New England University over the course of two weeks in February 2021. New England University is a four-year private institution in the New England region of the United States with an on-campus bed count between 1,001-2,500. I conducted video individual interviews with each staff member, and each interview lasted between 60 to 70 minutes. No documents were provided by the director, but a search of the university website provided the institutional and departmental guiding statements (e.g., mission, vision, values, principles), along with a brief synopsis of professional development values of the institution at large. All resident director participants participated in the photo elicitation activity which was discussed within their individual interview.

At New England, participants were also willing to share their experiences. Similar to the directors at other sites, Khloe, the director at New England, iterated she works “hard to create a culture of wellness,” yet acknowledged that she “also always feel(s) like I can be doing better.” Clare, Katie, and Sean, the resident director participants, also each had much to share. There was significant overlap between Clare and Sean’s experiences, and all three RDs shared how much they enjoy working with their colleagues and serving students. Katie also had much to share, but her interview was more centered on her experience as a person of color and sense of belonging at the institution as a staff member.

### **Bureaucratic Influences: “Burnout Has Always Been a Part of [the Work]”**

New England University is a private, religious institution in the New England region of the United States that places a strong emphasis on caring “for the whole person.” This institutional value applies to students, staff, and faculty, and in my interviews with participants at New England, it was apparent that New England is an institution that strong values relationships

and getting to know people as individuals first, employees second. However, despite the institution's commitment to valuing the whole person, operating a higher education institution in 2021 does not mitigate bureaucratic tendencies from overshadowing the ethos of care. At New England, staff resignations and subsequent budget constraints meant that more work was delegated to resident directors, and the pressure to do more work with less resources was a sentiment expressed by multiple participants. Within bureaucracies, a hierarchical structure informs the delegation of work (Manning, 2017). While each member of the organization has their specific role, when one member leaves and/or budget cuts occur, it can result in a shifting of responsibilities in an attempt to continue operating efficiently as an organization (Manning, 2017). This was the experience of staff at New England.

For resident director staff at New England, no amount of care for their well-being minimized the exhaustion they felt for being overworked and underpaid. Clare, Katie, and Sean, resident directors at New England, all spent time in their interviews discussing this, with Clare specifically sharing, "No amount of solid nutrition and meditation is going to make up for being dramatically overworked and underpaid for the amount of labor that goes into [our work]." All three participants, along with their director, Khloe, identified the increasing workload, staff reductions, and budget constraints as points of tension among resident director and other staff in the department. This is not unique to New England as Katie described, "I think burnout has always been a part of residence life, especially for live-in professionals and as an entry-level professional, I knew that was going to be a part of my experience." However, the feeling of exhaustion and burnout has been intense among the staff, particularly during the past year.

At the start of the COVID pandemic, the housing operations mid-level manager resigned to pursue a career opportunity elsewhere. Since then, the position has gone unfilled, primarily

due to a hiring freeze that occurred near the onset of the pandemic. Khloe, the director, discussed that in the past year, she has actively advocated for the clearance to fill the position, but does not “see a situation in which that's going to get filled any time soon.” When asked how she has managed delegating the work in the wake of the vacancy, Khloe shared:

I tried to delegate things to everybody on the team... but my staffed burned out real quick and it wasn't worth it to me to burn them out. I'm taking all that back on, and I'm doing all of that. Our administrative assistant is helping where she can and she wants to, but that's not helpful because I'm doing two jobs at the price of one, not being compensated for it, but the alternative is the stuff doesn't get done or I have burnt out staff.

Resident director staff acknowledged that they appreciate the advocacy from Khloe to get this position filled, but feel the effects in their work. According to RD Sean, the limited resources and that the department is not “given much extra...even though we are the essential department on campus as a 94% residency normally on campus” has a large impact on staff morale. Sean went on to share that, “sometimes we get a shout-out from senior leadership during a community gathering or the town hall meeting with the staff, but for me that's not enough.”

### ***University Budget Constraints Impact Front-Line Staff Significantly***

Budget constraints during the past year have impacted resident directors in substantial ways outside of assisting with the workload in the absence of a filled mid-level position in their department. Resident director staff had an active role helping with the isolation and quarantine housing of students. Clare “had colleagues go to HR and say, ‘Has there been any thought to hazard pay? Has there been any thought to any other forms of support?’ And the answer has constantly been, ‘No, you know the budget crunch we're in, we just can't afford to do that.’” Sean held a similar perspective, saying that his understanding from HR was that “our work as essential

workers wasn't essential enough for us to get hazard pay or any other type of compensation for us handling students who were positive.”

Hazard pay aside, resident directors experienced much tension around compensation and around the correlation between what they are compensated for and the work they are asked to do. Katie, one the resident director who previously acknowledged the burnout culture within the larger profession, said:

I think one of the biggest things that has come up, and I think it's up for debate, honestly, now is the way that we're compensated in terms of "Oh, you get free housing and all of the..." and I guess if you get a meal plan or anything like that, in exchange for being on call. Okay, but then your salary is really, really low. I know there's been a lot of talk around we can't continue to say things like this to validate housing professionals being paid nothing, basically.

I am being paid way more than I was in grad school. Yes, but I still... I'm at the point where I'm 25 and I cannot buy a new car. I literally cannot buy a new car because I do not have the funds to do that while continuing to pay off student debt, while paying other things and still maintaining... those things that support my wellbeing. Having to choose between having a car that needs repairs every two months because of something that goes wrong, because I can't invest in a long-term investment, and choosing the short term things that really helped me survive is unacceptable. I think [higher compensation] is something that could really make the work environments better, is if we felt more valued in that sense.

Clare, one of the more senior resident directors, said that despite how much she enjoyed the relationships she had with colleagues and the work she got to do with students, she believed it is

“fundamentally unjust to think that people are going to put in this many hours and that it's right to pay them \$32,000 for that.” The demands on resident director staff were not unknown to Khloe as the director. Khloe has been at New England for well over a decade, first as an assistant director in residence life before her current role as director, and has seen the significant increase of work on staff without the same increase in resources. Khloe acknowledged that “there's no way I had this much administrative workload when I was an RD, and so I think that's burdensome.”

Supporting her team was incredibly important to Khloe, which is why she took on much of the operations work in the wake of the associate director vacancy. She was also attuned to how the fiscal constraints and increasing demands of mental health response and COVID response impact her live-in staff, urging staff to “take some time” and working with them to do so. In doing so, this added to her workload. Khloe described:

I have that understanding from everybody, "She's doing the best she can," but... this isn't sustainable, and things that I wouldn't have normally let drop I'm just.. balls are dropping, but I'm just at that point where I'm like, well I'm doing my best. That makes it hard.

### **Organized Anarchy Influences: “You Wear 18 Hats...Working at a Small College”**

Similar to many other small institutions, staff members at New England University were often asked to help out in a myriad of ways, with work both in and outside of their department. The high volume of work required by resident directors, as a result of helping out in additional ways, contributed to feelings of exhaustion. Competing priorities in how best to serve students and decisions made based on changing needs (e.g., COVID response, bias protocol response) describe how organized anarchies operate (Manning, 2017). As Clare stated, “You wear 18 hats and have multiple different types of responsibility that go along with working at a small college.”

Katie and Clare described experiences to feeling the effect of wearing “18 hats.” Clare navigated experiences where there was an assumption she was able to help other departments out with their work, given that her position required her to live-on. She provided an example of where the university was considering expanding mail room hours based on students’ request and came to Khloe, the director, to ask for the support of resident directors. As Clare explained:

There was a question about, "Well, it would be better for the students if the mail room were open longer. But we're not interested in extending the hours of the mail employees, so can't the [RDs] just work more?" And our director had to fight and elevate that to a vice-presidential level to say, "Yes, the [RDs] might live here, but you can't actually say, 'Okay, from 8:30 to 4:30, do your job and then from 4:30 to 8:30, work the mail room.'"

Another example Clare shared was how a colleague kept asking her to do a cooking demonstration and was frustrated that Clare could not help in a timely fashion. The colleague’s mentality was “You live here and you eat, so of course you can cook for 20-30 students!” Katie, who had been a resident director at New England for less than a year, discussed how integral the support and work of resident directors are in ensuring processes and protocols were upheld. Katie reflected on how resident directors often played a pivotal role in the bias response protocol to ensure that action was taken and community members were supported following an incident.

Katie, an Asian American, had the following experience in the fall semester:

There was an incident that happened where somebody in my building or someone walking through my building had wrote an anti-Asian sentiment on the bulletin board that was right next to my apartment in regard to COVID, and that shook me to the core. I was too shaken as a professional and person to then take part in the bias education response team response, so then nothing was done about it. Not even an email to the building.

There was just a lack of follow through there... If I was someone on the bias education response team, I wouldn't put it on the person who was impacted, even if they're a staff member, to decide what happens. I would say, "We need to address this because this is not okay."

For Katie, this incident had significant influence on her experience at New England University. Katie's experience is reflective of the organized anarchy frame given the fluid participation in the bias response team. Katie was supposed to lead the response to the incident per institutional protocol since it occurred in her community, but as the party directly harmed, there was no protocol or plan in place about who else could take the lead in ensuring the incident was addressed.

From a director perspective, Khloe saw this behavior, of doing "10,000 things" fostered in students beginning in undergrad which then informed how entry-level resident director staff approach the work.

A lot of us, if not all of us, who end up working in some student affairs function were some form of a student leader in college, or we were in some other type of helping field. When you think about our work with student leaders, and this conversation is starting to show up more, like what are we teaching them? They all do 10,000 things, and then they pull these all-nighters because they haven't paid attention to their classes for three months. I think that's where it's coming from. We've taught our student leaders that this is normal and this is just what you do. I think it starts there in our work with students because those are the people that become RDs, for the most part... We hire student leaders who we never taught to be well.

In order to better support resident directors in being able to have agency in determining how to best balance their work, and learn what they can and cannot take on in addition to their assigned responsibilities, Khloe believed the support approach is multi-layered with encouraging current staff to use their comp, sick, and vacation time, and also having intentional conversations with students about what is realistic for them to be involved with outside of the classroom.

### ***Inability to Care for Self Because of the Workload***

The need to continue to do more work with fewer resources was a consistent theme throughout the interviews with staff at New England. Much like other small colleges, and higher education in general, the changing needs of students, the effects of society (e.g., COVID and other pandemics), and continual budget constraints place more demands on the staff who work with students most closely (Collins & Hirt, 2006). Khloe, in reflecting on her own experience as a resident director in the early 2000s, said:

There's no way I had this much administrative workload when I was an RD... When I was an RD, [dealing with] alcohol, people drinking too much and transporting them to the hospital, and that's bad, but that's not even the bulk of what they (resident directors) respond to now. It's all these mental health crises or it was a drug, and then that turned into a mental health crises, or there was a bias incident. I think those are the things that can burn them out.

At the start of this academic year, New England adapted its on-call duty structure. Previously, resident directors had served on call twenty-four hours a day for seven days at a time (Monday to Monday). Shortly after the start of the fall 2020 semester, it became apparent that this model was unsustainable due to the additional expectation of helping with the isolation and quarantine housing for exposed or COVID positive students. The department switched their on-

call model so that the person assigned to being on-call was only on-call outside of business hours. Someone else in the department, resident director, assistant director, or director, then held the on-call phone during business hours. As Clare described, this allowed the on-call person to have a break, focus on office tasks, and use the comp day each resident director is provided for serving a week on-call. However, according to Clare, despite the respite from being on-call during the business day, it did not diminish the exhaustion experienced from serving on-call and being expected to fulfill her position responsibilities.

This past weekend when I was on call, I was awake Friday night until 3:45am responding to typical non-COVID on-call situations and then got my first call about COVID quarantine and isolation at 9:15am and worked non-stop without eating or taking a break until 4:15pm to put everyone into isolation and quarantine. It started to rain and hail in the midst of that. By the end of it all of my clothes were totally soaked through, and I did about 45 minutes of work sopping wet because I just didn't have the time to go back to my apartment and change into different clothes. Which of course has an impact on my wellbeing....[Then back at it Sunday with the expectation] I'll be in the office 8:30 tomorrow and Mondays are when our staff meetings are, so Monday's always a day that I work until 9:30pm, so yeah, sure. Go right from the on-call weekend to a 13 hour workday. This is fine.

Sean, another resident director, also reflected on the long hours that the job entails:

I get paid for 37 hours a week... but I work probably closer to 45 maybe, because I work 8:30 to 4:30, but I have a student club meeting an hour at night, a staff meeting an hour at night, [and] whatever else there would be. So, I think in our role, other duties as assigned is a big part of our role of having to work late hours [and] weekends...So, that kind of

contributes to the lack of work-life balance, because we're not being supported in the sense of like, "No, don't work outside of 8:30 to 4:30, or, if you do, take an hour off in the morning," which it's something that is often said in our department, like if you work an hour at night, take an hour off in the day, but it's not easy to always do that with meetings...I've got to do [one-on-ones], so I can't shave off hours at all times.

For Clare and Sean, the long hours that are required of the job often limit their ability to find time to take care of themselves so they can continue to be their best selves at work. While additional compensation for their work would be appreciated, both recognized that it was not feasible given the institution's financial situation. Both individuals were appreciative of the supportive environment that Khloe, their director, cultivated, felt an appreciation for the relationships they have with colleagues, and enjoyed working with and serving students, but the increasing workload requiring more work after hours significantly drains their ability to care for themselves.

### **Spiritual Influences: "I Genuinely Want to Know [You]"**

Despite the demands of the work and frustration with lack of sufficient compensation, potentially the most significant factor in retention for staff at New England University was the relationships they have with colleagues. Similar to participant experiences at Northeast and Southeast, everyone interviewed at New England spoke highly about their relationships with their colleagues and how it added much value to their experience, thus, supporting the spiritual organizational characteristic of emphasizing relationship building when working with colleagues (Manning, 2017). Resident director staff truly feel cared for and valued as people first by the actions of Khloe, the director, others in leadership, and the relationships they built with fellow

resident directors. Khloe expressed her philosophy around getting to know her staff members as people first:

It kind of throws people off at first, when I'm first interacting with a staff member, my initial questions aren't around work. They tend to be like, "Tell me about your family. Tell me about what your..." and it's all couched in. Whatever you're comfortable telling me... I genuinely want to know, so I think there's part of that, but I think that I can't begin to effectively support and supervise someone if I don't know who they are.

This commitment from leadership in getting to know someone and learning about what they value helped to foster a strong team dynamic. Sean said he enjoyed "being on a strong team and working with my colleagues, because they're great," despite the long hours he puts into his work. Both Clare and Khloe identified one interaction they missed most during COVID was being able to grab lunch daily or do the occasional trivia night as a department at a local pub. When Clare's father passed away a couple of years ago, the university "paid for several of my co-workers to fly down to [my hometown]...to attend his wake and funeral. So I think a real commitment to one another." However, the deep commitment to building strong relationships and supporting each other in small ways did not mitigate the exhaustion felt from the work overall. As Katie shared:

I don't think it's sustainable for me to stay here just because of the level of exhaustion that I have experienced. I've made some great connections. Our team is very strong in terms of relationship building. I know [Khloe] and [the assistant director] are very kind people, and if we needed anything from them, they would give it to us in a snap of a finger, but there's some things you just can't change. Those are the things that really are impacting my experience here.

### ***Role Modeling and Advocacy Are Noticed and Appreciated***

Similar to the directors at Southeast and Northeast, Khloe placed a strong value on role modeling and promoting work-life integration. Khloe said that from the President to the VPSA to her direct supervisor, there was a commitment to put family first and a general understanding that personal life might intersect with your 9-to-5 responsibilities. As the director, Khloe believed that role modeling and promoting work-life integration were equally important so that resident directors knew that that it is okay to take time for themselves. For example, once Khloe told staff that she could not attend an all staff meeting due to it being “her son’s birthday.” Similarly, when a staff member’s significant other or family member is in town visiting, she encouraged them to take time off, even if it meant missing meetings. Khloe provided an example of how a resident director was on-call recently and feeling exhausted. Khloe knew they valued going to the gym, so she encouraged them to go, telling them that she would hold the phone. Ultimately, Khloe stated that as long as a staff member is getting the job done, “I’m not paying attention to where you are and what you're doing... You can go to the gym in the middle of the day or to the supermarket or see your mom, whatever.”

### **Benefits Alone Do Not Support Well-being**

Staff were also provided other benefits, both formally through HR and through their department to support well-being. Khloe discussed that staff have “unlimited sick time” as long as they “don’t take advantage of it.” She encouraged her staff to use these days to care for their mental and emotional well-being versus using a vacation day. Staff also received a meal plan, which was appreciated more before COVID, but Clare wished she was “given that money as ... money.” Live-in staff also valued the pet policy, and Clare, Katie, and Sean all referenced having pets with Clare and Katie speaking specifically to how their pets support their well-being. Clare

stated that the pet policy did not exist when she first came to New England, but Khloe's advocacy made this policy come to fruition. Live-in staff also appreciated the comp days they received post-training periods and after an on-call week, but because of the amount of work they need to accomplish, staff sometimes struggled with determining when to use their comp time. As Katie shared:

We normally get one comp day for on-call work, which is awesome, because I've never had that before. [After a busy week, Khloe] was like, "You can take two," and I'm like, "I can't even fit two comp days into my schedule." It's impossible for me to figure it out.

Despite budget constraints, resident director staff also valued Khloe's commitment to their professional development. Khloe is committed to encouraging her staff to engage in professional development initiatives, because she is aware that this helps keep them "feeling excited and engaged" in their work. Clare reflected on Khloe's advocacy and commitment to the staff in the following way:

In previous years the department was really proactive about supporting conferences and professional development and funding and even with the budgetary restrictions that had been put into place with COVID, our director is very creative about finding ways to fund some of that... When I started I was already hearing about how there used to be a lot more money for professional development and now there's not. And then in the time that I've been here, I've seen it decrease every year. But [Khloe] has really exercised as much creativity as she can in supporting some of that. [For example] her advocacy in having a pet policy created... has been helpful. I feel a lot of support at the departmental level. I don't, to be frank, feel support terribly much beyond the departmental level.

Ultimately, for resident director staff at New England, the benefits, supportive supervisory environment, and relationships they have with colleagues and students is not enough to minimize the exhaustion and burnout they experience from the increase of work due to COVID, uninformed expectations of colleagues outside of their department in requesting their support since they “live on campus,” and low salary.

### **Summary**

At each of the three sites, how staff understood and made meaning of their experiences, and the larger departmental culture around staff well-being support, was influenced by varying types of experiences. No one site fully embraced a specific organizational structure that informed and guided their work. Instead, in operating within a larger bureaucratic organization, staff at all levels pivoted their work based on changing student needs, societal influences, and demands of colleagues elsewhere in the institution. As student affairs practitioners, whose work is often centered in caring for students, it was apparent that placing emphasis on connecting with staff members as people first, employees second was a strong value and helped to cultivate an environment where live-in staff felt supported by supervisors. Despite this care-centric approach, live-in staff largely felt exhausted and teetering on burnout, if not already there, due to the relentless demands of the resident director position.

### **Cross-Case Analysis**

The following section shares the analysis across all case sites. I will use the same structure as implemented in the within-case analysis to structure this section, sharing themes that showed up collectively. I will focus more on the director’s perspectives in the cross-case analysis as what they shared is more applicable and noticeable as a collective group in how they lead and support their individual teams. I will begin this section by discussing general well-being to

provide contextual support to the themes discussed as they connect to Manning's bureaucratic, organized anarchy, and spiritual organizational frames. I will end this section sharing themes salient to holding marginalized identities in the workplace.

### **Well-being**

One of the driving factors for participants to decide to participate in this study was the role well-being plays in their own life. Across experiences, participants recognized the importance of taking care of one's self mentally, physically, and socially, and some resident director participants shared how they frequently encourage their students to take a balanced approach in caring for their own well-being. In other words, participants realized that ignoring one area of their well-being could be detrimental to other aspects of their well-being. This is supportive of the World Health Organization's (1958) definition of health, which encourages individuals to take a balanced approach in caring for their mental, physical, and social health.

Participants were at varying points on the spectrum for how they practiced well-being, and many disclosed deeply personal experiences of how their practice of taking care of their own well-being has evolved over the years, in part due to their time working in residence life. Both Barbara and Khloe reflected on how they believed the field does not cultivate wellness for professionals. In reflecting on her sixteen years in the field, Barbara said she "didn't work in any negative work environment, but [working in residence life] did set up a lot of anti-wellness behaviors in me." Barbara began to place more value in practicing holistic well-being a few years ago when she focused more intentionally on eating healthier and being more active. As a result, she brought her appreciation of well-being behaviors into the workplace through encouraging staff to use time during the business day to workout, which she did as well. This was noticed and appreciated by staff and was a specific example mentioned by many of the staff

interviewed at Southeast. Josh, a resident director at Southeast, stated that Barbara's commitment to well-being is infused in other areas of work. Josh was in charge of meals during summer training a couple of years ago, and he received the directive via Barbara to "have healthy meals" because she wanted "actual, nutritious food, even if we have to spend more money, because that's what's going to keep us alert." Josh discussed how the culture Barbara creates is "infectious."

Across participants' experiences was also the understanding that one's ability to practice well-being well was linked to being able to intentionally take care of yourself in each dimension - social, physical, and mental. Katie, a resident director at New England, gave specific examples of how she maintained wellness within each dimension. Katie was an "avid CrossFitter" and recognized that in order to be holistically well, she also needed creative outlets, such as bullet journaling and painting, to express "my emotions in a different way than picking up a weight and throwing it down to the ground." Katie described that when she was able to practice well-being in each dimension, she noticed "small changes in my organization and my ability to get things done... If any part of it is off in the equation of my wellbeing, I notice a huge impact during my work day."

Other participants also noted that when they were not able to take care of themselves, it impacted work and vice versa. Cathy, a resident director at Southeast, has a very complicated relationship with maintaining personal well-being. She joked about how she often would tell students, "do as I say, not as I do" when it comes to practicing healthy behaviors. A challenge Cathy often had was around healthy eating. As she shared:

At the end of the day, when I've been in 10 different student meetings, removing students from campus because that's where we are these days, I don't want to cook dinner. And so,

then, that typically means I order DoorDash or I will eat out, and that food is not as good for your body. And so, I don't tend to fill my body with good [nutrient rich] food.

Cathy is not alone. Many of the resident director participants acknowledged healthy eating is hard for them to do particularly when work is chaotic. Taylor, a resident director at Northeast, said that meal prepping is very important to them and brings them happiness. Taylor discussed that they enjoy meal prepping because then they “don’t need to stress” about what they are going to eat during the week.

My whole week will be thrown off if I don't have [meals] together. Then I get frustrated because like, if we have a long day and I haven't had something prepped for dinner, then I'm like, "I don't want to cook." That is annoying. I get mad at myself about it.

When work is chaotic, whether it is training and move-in season or just a lot of student needs to tend to, other healthy and positive well-being behaviors take a backseat. Several resident directors spoke about the importance of having a social group external to those that you work within the department to allow you to more fully disconnect from work. Being able to be physically active was also important to participants, whether it was going to the gym or just being able to go outside for a walk or run. Participants at each site talked about how they found the campus they worked on and/or surrounding community a place they could be in nature and disconnect from the work. However, all of these positive, healthy habits fall away when work becomes too stressful. Steve, an assistant director at Southeast, previously conducted a study that examined the body mass index (BMI) of people working in student affairs. When Steve shared his findings, people were shocked that the BMIs were high. Steve said:

I think some people were really taken aback by the study findings, and some were defensive. I was like, "These are the numbers. So, this means we need to do more taking care of ourselves. Because overall, we have a population that is obese in student affairs. Steve never published the results of his study, but said that because of this study, he placed a stronger emphasis of both practicing healthy behaviors, as well as encouraging his resident director staff to take care of themselves holistically. Steve realized all dimensions are connected, and "if one is up or down, it kind of plays off each other. So, they definitely go hand-in-hand."

In the past year, the COVID pandemic has exacerbated people's inability to take care of themselves. Josh shared how he did not go to the gym as much as he used to, and Cathy, John, and Katie each talked a little bit about how isolation in the past year has affected their ability to socialize and maintain connections. Emma, the director at Northeast, spoke about how in the past year she felt like she is "flapping in the wind... trying to focus [on supporting] my team as much as I can, because I can control that," yet this comes at the cost of not being able to be the best partner, mother, student, or supervisor she can be. Emma believed that within the profession we must begin asking "What is important in the work that we do? How do we value our time? How do we value our employees?" because we have reached a point where the amount of work we are required to accomplish is unsustainable and contributes to people's inability to fully care for themselves, which in turns leads to burnout and attrition from the field.

### **Bureaucratic Influences: "System Makes It Impossible...To Do What's Right"**

In present times, the work of resident directors, in some ways, is significantly different than the work of resident directors at the turn of the twenty-first century. Barbara, Emma, Khloe, and Steve all reflected on their experiences of when they first started in the field as live-in resident directors and acknowledged the ways that the position has changed due to the rising

number of students entering college with mental health issues, increasing administrative responsibilities, the demand to do more with less financial resources, and societal forces (e.g., COVID) which also influenced the way work is operationalized in residence life. These changes have influenced the bureaucratic ways higher education institutions operate in that most of the student-facing work falls on the shoulders of resident directors, which is in accordance with how Manning (2017) describes the functioning of bureaucratic organizations. Department leadership recognized the value in developing meaningful relationships with their resident director staff as a means to support them in their work and role model healthy workplace behaviors that were not necessarily valued in the field twenty years ago.

Consistent throughout the interviews was the recognition that the demand on staff supporting students in distress takes a toll on staff's own well-being and satisfaction in the role. Staff at each site talked about their institution's emphasis on implementing a robust crisis protocol that provides comprehensive support to students in crisis and post-crisis. Steve, at Southeast, shared that the protocol employed at Southeast has been adapted by other institutions because of its level of detail to how to manage varying incidents from supporting the student(s) in distress and the students indirectly impacted to communication templates and other follow-up measures. Northeast also employed a protocol that required staff to provide high-level care and support to students in/post-crisis. Magnolia, a resident director, described that comparatively unique to Northeast is the decision to have entry-level staff in non-residence life offices live on-campus and serve in the on-call rotation. However, in his time at Northeast "all of those positions [have] become vacant as a result of the on-call process," thus often leaving the on-call team short-staffed and placing more burden on the resident directors to respond and support students in distress after-hours on top of their "day job." As Josh, a resident director at Southeast, shared,

the demands of the on-call and other aspects of the role RDs feel challenged by in current times is not isolated to just Southeast; rather the problems exist at the larger level of the profession.

Aside from the demands of constantly supporting students in crisis, the customer-service nature of our profession also contributed to the increasing pressure placed on resident director, and other staff, to cater to the student experience. Josh spoke about the “pressure on making the residential experience be worth it for our students, aka our customers,” so they choose to live on campus versus paying to live in a nice complex off campus. Emma, Northeast’s director, talked about how our customers (i.e., students) are “increasing their expectations,” and our profession is caving to it, sometimes at the cost of not supporting the well-being of staff. She continually found herself “wanting to do what I know to be right, or wanting to advocate what I know to be the best practice, or just frankly the kind, compassionate thing to do, and the system itself makes it impossible.” Emma realized that her resident directors are exhausted, and so was she, yet she was at a loss for how to create a better work environment that is able to support staff well-being while also meeting the needs of students.

### ***Changing Workplace Expectations***

Additionally, there was an acknowledgement of the change of workplace expectations of individuals entering the profession as entry-level professionals. Whereas when Barbara started in the field, there was the mentality of “don’t be a clock-watcher,” do not complain, and be grateful for provided housing and meals, that is no longer the case. Barbara described an anecdote of how she worked with a resident director several years ago who clocked every hour worked outside of 9-to-5 so she could claim the comp time for it. The RD did not realize what it meant to be a salaried position and had to have a conversation with both Barbara and the assistant director of the area to understand the expectations of how to flex time and when flexing time is appropriate.

Similarly, Steve discussed how he recently had a resident director come to him to share that they “deserve more.” He engaged them in a conversation around what they were looking for, and the resident director shared that they “deserve more amenity...deserve a better place.” Steve attempted to be open-minded during the conversation but shared that in the back of his mind, he was thinking “If I had your apartment when I was in housing for a starting [place], I would've been thanking God.”

Emma, who has served as a director of residence life at two different institutions, shared an “anecdotal observation” of entry-level staff in that:

They have some entitlements. They think they know more than they know. They think they should be more important than they are. They think that they should sit at more tables than they sit at. And yes, confidence is great, and competency is absolutely what we strive for. I'm also not trying to pull the like, "Pay your dues and go through the gauntlet, and that's how it works," because that's terrible, toxic and bad.

Even in conversations with Barbara, Steve, and Khloe, there was also an acknowledgement that just because being a resident director was a certain way for them, it did not mean they did not think the system needed to change in some ways. Rather, it was recognizing multiple perspectives to what the role currently entails, the system in which it operates, and the perspective of individual staff. Emma viewed some of the profession's tension with entry-level professionals to be a result of how we have created what it means to go to college.

That's our own fault. In this profession, that's us. That's our fault. All the customer service, all the catering, all the concierge, all the amenities, all the nap pods, all the things that we are trying to do to be the biggest, best, jazziest, coolest freaking institution out there. And then we graduate our students, who come back and become our grads, who

come back and become our employees. And then we wonder, "Well, why are you like this?" Because we built them this way. So we as a profession need to freaking take some ownership here, and stop ... complaining about these staff members. And I know that I'm calling it out, but I'm also acknowledging like, "This is what it is, but we also made it that way." So again, what can we control here?

**Work-life Integration.** Despite these points of tension with varying expectations, all the directors and Steve spoke highly of the commitment and passion that their resident director staff have to serving students. There was an acknowledgment that their staff work hard both during and outside of business hours. Resident director staff also overwhelmingly acknowledged that they needed to practice work-life integration instead of balance because of the complicated nature of living where you work and needing to do work after hours. As previously described, Sean, a resident director at New England felt that other duties as assigned constituted much of his work outside of traditional business hours. While Khloe shared that staff are welcome to come in late, Sean had a hard time adjusting his hours because of meetings already placed on his calendar. Magnolia, at Northeast, made a similar statement. To compensate for not always being able to adjust hours, Magnolia and Sean recognized the importance of practicing work-life integration through "not checking email after hours" and "leaving campus more [often]."

Josh, a resident director, had much to say on the topic of work-life integration. He strongly believed parts of the RD job are unavoidable (e.g., serving on-call, working late hours) and got irritated when colleagues "get frustrated about the aspects of being a live-in professional that are baked into the role." In Josh's opinion, if you are applying to be a resident director then you need to understand the unusual work hours that come with the role. If this is a point of tension for you, then you do not need to be a resident director. However, for Josh, and for other

resident directors interviewed, there was a point of tension of feeling like “housing owns you for certain months of the year.” Josh, Magnolia, and Taylor all spoke of guilt they felt for requesting time off for significant life events (e.g., wedding, baptism, partner’s health emergency) during summer training and move-in, even though the training and move-in processes were successful and their absence had no long-term detriment to the work they contributed in their role.

### ***Hierarchical Relationship Building Matters***

A common value across director and assistant director participants was the emphasis on building strong, positive relationships with those that they work with. Resident director participants also appreciated and valued the relationships they developed with colleagues. For directors, one of the important factors in building positive relationships was the ability to communicate in ways that are transparent and support resident director staff in their work. Emma talked about how clear communication was a “love language” for her and that being able to provide clear communication gave her “power in [her] role” and allowed for her to build credibility and authority with her larger team. Emma engaged in tough conversations with honesty and vulnerability, seeking to hear the varying perspectives, because in doing so it allowed for “channels of change” to adapting responsibilities and determining how work was done as a unit. Khloe, the director at New England, operated with an open-door policy. While in a non-COVID year, she did not directly supervise resident directors, she worked hard to get to know them as people first, so they felt comfortable coming to her when they have an issue. She recognized that often times when RDs come to her, it was because they “cannot emotionally handle” whatever situation they are coming to speak with her about. Khloe provided space for them to share their concern and then had a realistic conversation regarding to what extent (e.g., on an individual or system level) their concern can be addressed.

However, despite directors' intentions in fostering a workplace that embraced transparent communication, some resident directors expressed frustration with decisions made and feeling their voices were not always included in the process. Josh, a resident director at Southeast, expressed that he often felt like as resident directors they were the "last to know...but first to be expected to do" when decisions are made by senior leadership. Cathy expressed a similar sentiment, and acknowledged that while she does not "understand their level of things," she believed senior leadership could do a better job of bringing resident directors together to have a conversation around "These are the expectations. This is what needs to get done. How are we going to do it?" In doing so, it would create a stronger sense of trust and buy-in to larger decisions made. Barbara, Southeast's director, mentioned how she shares both when resident directors' voices have been heard on decisions, and thus the decision changes, as well as when decisions cannot change. She has found being clear and direct of when "something can't change" is best, but "where there's an open door, I try to have [a conversation]." As previously discussed by Emma, resident director staff tend to have a perspective that they should "sit at more tables than they sit at," yet in my conversations with participants, there was a disconnect between directors striving to include resident director voices, but RDs not always recognizing that this was occurring.

### ***Salary and Benefits Matter***

Central to staff's perception of how they are able to take care of themselves is the salary and benefits they are provided to live on campus. Clare, John, and Katie all specifically expressed to how their low salaries made it challenging to pay bills and live comfortably. As Clare declared:

I just think that it's fundamentally unjust to think that people are going to put in this many hours and that it's right to pay them \$32,000 for that. I actually think that even if we were making significantly more, these hours would not be acceptable.

John, who is married with a child, shared how the salary he earned places him “well below what I feel like is the poverty line, with the exception of the fact that I have an apartment that I don't have to pay for.” Katie also said she had to make “short-term” decisions, such as paying for constant repairs to her car because she cannot afford to buy a new one, and that this perpetuated the cycle of not being able to save and only affording basic necessities. Ultimately, some RD staff felt they were “overworked and underpaid” and as Josh shared, “if I'm going to work this much anyway, I want to make more money, which is not the type of person I thought I was, but here I am.”

Aside from salary, policies and benefits, both in terms of apartment size and renovations, influenced staff well-being. Both John and Clare discussed how apartment inequities affected their experience. John specifically stated how there were “incredible difference(s) between the apartments that were made, who knows how many years ago, and then the ones that were just [recently] built.” Both Clare and John moved into new apartments last summer. For Clare, her apartment move came with getting a dishwasher, which was an amenity she valued even more during the COVID pandemic. John's new apartment was a sizeable upgrade with more space and newer appliances, both of which he greatly appreciated. John also said that despite his upgrade, he felt frustration on behalf of the continued inequities across staff apartments. He remarked that one of his colleagues “doesn't have a washer or dryer, [yet they get] paid the exact same amount I do.” John believed it is the fringe benefits such as these that can make a difference in the live-in experience.

Partner and pet policies also matter to staff well-being. Most salient across nearly all resident director participants was the value of being able to have pets live with them. At New England and Northeast, a formalized pet policy allowed staff to have one to two pets live with them. Staff, who had pets, talked about how their pets provide them with social and emotional support, particularly following tough days or just during the past year of living in isolation because of the COVID pandemic. Taylor identified that their cats played a “big role in [supporting] my own mental health.” At Southeast, staff had to get approved through the university’s accommodation office to have an emotional support animal, and Cathy, who had her dog approved as an ESA, also described how her dog has been integral to keeping her emotionally and mentally well during the past year. As previously mentioned, not having a formalized pet policy caused tension for some staff, and as Barbara stated, not having a pet policy meant that Southeast sometimes lost out on viable candidates for the resident director position.

Additionally, Barbara realized that the low salary at Southeast deterred candidates and frustrated current resident directors. She said that live-in staff has advocated for increased salary that is closer to the FLSA recommendation of a few years ago. Barbara engaged her staff in conversations around the realities of salary compression, sharing she will not “advocate for [resident director] salary [increase] until the assistant directors get where they should be.”

### **Organized Anarchy Influences: Talk a Good Game but “Absolutely Suck at It Ourselves”**

Indirectly shared by many participants, both at the resident director and director level, was the idea that today’s resident director staff must be all things to all people within the institution. According to Manning (2017), this idea can be contributed to fluid participation occurring within an institution and competing priorities can make it seem the work never ends as

there is always a project to accomplish. Josh, a resident director at Southeast, shared that he chose to do work when away on vacation because:

It's harder for me to transition all my cases to someone else and explain to them where they're at and then pick them back up. I'm just going to do it. And that's been my perspective the whole time. It's easier for me to work when I'm on vacation or out of the office than try to get someone to cover this stuff. But that's so unhealthy.

Josh recognized that this is unhealthy, but he felt like if he's "not at work, there is no one who is stepping in to cover my stuff." Specifically, he stated:

I supervise a million people. I do all this case management. I do all these conduct processes. I'm doing RA selection. If I just truly left for a week and didn't look at my email, number one, I think people would be frustrated they hadn't gotten a response. Number two, it would be so punishing when I finally did look at it that it wouldn't have been worth being away.

Aside from feeling like the workload is insurmountable, resident director participants also felt that they were the 'catch-all' employees for the institution. As Magnolia at Northeast shared, the "biggest struggle of an on-call professional is the misunderstanding of our role." He cited examples of how staff in other offices assumed that since he and his colleagues lived on and responded to calls after hours, that meant they were able to delegate work to these staff members. Clare, at New England, provided examples of being asked to do cooking demonstrations and work the mail rooms since she lives on campus. Both Emma and Khloe talked about how over time we have normalized the notion that it is expected that we do "10,000 things" and still thrive as people. As Khloe said, "We've taught our student leaders that this is normal and this is just

what you do. I think [teaching what is healthy and appropriate] starts in our work with students because those are the people that become RDs.”

### ***Crisis Response Directly Contributes to Staff Burnout***

Serving as a crisis responder was a frustrating and exhausting experience expressed by many of the resident director participants. Six of the eight resident director participants described how draining it is on their own well-being to serve in an on-call rotation and constantly support students in distress. At Northeast, both Magnolia and Taylor said that many of their colleagues have left their position “as a result of the on-call process.” Taylor mentioned how it is common when you are on-call to only get “three hours of sleep” and be expected to be in the office the next day. While they were encouraged to flex their time, Magnolia struggled to flex time to because while his supervisor can “say all the right things, they can't take the meetings that I have on my calendar the next day.” Recently, the exhaustion and frustration felt from the on-call and crisis response work RDs do at Northeast came to a head when in a department meeting Taylor said:

I just need to make it known that we won't all be sitting here next year if we continue the way that we're doing with, especially the on-call piece. I was like, "We're not supported well." I got colleagues that are getting three hours of sleep. I have a colleague that has a pregnant wife, and we're not supporting them in making sure that this person's getting time off to go do the things that they need to do. I was just really candid. I was like, "That's not a threat. That's our real life." You're not going to have [RDs]. Then I'm not sure what the institution would do. It's like we all wound up getting a job right away. I think it hit home a little bit differently. I don't know what it was about my tone that had

our director and associate director just feeling differently. They had like a seven hour conversation with our AVP... I was told yesterday that change is coming.

Similarly at New England, staff feel the long hours and crisis response responsibilities drained them the most and negatively impact how they were able to care for themselves. As Clare said, she felt much “support at the departmental level. I don't... feel support terribly much beyond the departmental level.” Clare articulated how Khloe has advocated for external support to help ease the burden of after-hours work and crisis response on staff, but it is denied more often than not. Sean also spoke about the impact of doing COVID response on his well-being, sharing:

We're not getting compensated to be a COVID response team, but we are that now. So, something like that is kind of where it's like our well-being is ignored in a sense.

Resident directors at all three sites expressed that they felt supported by their departmental leadership, particularly around their on-call responsibilities, but they did not feel support externally. Instead, there was a feeling that many responsibilities were delegated to them while on-call due to a lack of understanding about the position. Ultimately, while the support from department leaders is appreciated, it does not mitigate the burnout staff feel from their on-call and crisis response responsibilities.

At one institution, both the director and resident directors disclosed how within the past year three of the resident directors had to take “leaves of absence for mental health reasons.” As the director described, these absences “definitely coincide[s] with the pandemic and what it means to be a live-in staff member in the midst of a global crisis, but there's been an increased workload, and that feeling of well if I don't do it, who will?” The director went on to state that none “of the three asked for it (i.e., the leave of absence).” Rather, the director had to initiate the conversation with each staff member.

Over a series of a couple weeks, I would just notice there'd be negativity or self-doubt or crying. Even though all three were different, there just came a point when one of them was just like, "I can't do this." I think it was because we had such open and honest conversations, but the other two, I had to be like, "Are you okay?" Because you can see it on their face. You can see the circles under their eyes, and you just hear the way either they're talking negatively about students... That's how I would notice. There are physical signs, but there's also just this tone.

The impact of three live-in staff members taking a leave of absence, and two not returning to the position, had a significant impact on the overall dynamic on the team and prompted even further conversations around workload. As one of the resident directors declared, "if you have three out of seven people taking official or unofficial mental health leave, at what point do you say, there's a problem with how this position is structured."

### **Spiritual Influences: "Putting Value in the Things That [Staff] Value"**

Despite frustrations and tensions with specific responsibilities, salary, and cultural elements of an institution, it was evident in the interviews that a driving factor in staff's experiences and satisfaction with their work rested on being able to cultivate and maintain positive relationships with colleagues, both in and outside work settings. Additionally, observing from department leadership how to role model healthy behaviors in the workplace and achieve work-life integration were two experiences resident directors valued. Across all sites, the effort to create healthy work environments, cultivate meaningful collegial relationships, and promote the idea of person first, employee second all were tangible examples of the spiritual frame's characteristics as described by Manning (2017).

John, who described many frustrating experiences in his current position, also shared that what keeps him at Southeast is his love for the institution, which is intimately connected to the people who “are really kind” at the institution and show an investment in him as a person. John talked about how a majority of the resident directors have a very positive relationship with Barbara, and that she “has done a lot to help” John during his time at Southeast, both professionally and as a new father.

Taylor, at Northeast, spoke of the strong bond they had with their colleagues in that “it feels like kind of like a family. I joke that I'm not friends with all of them, but that's not really the real reality.” Magnolia, a colleague of Taylor’s, talked about how the Northeast team jokes about how his wife is also a resident director, since she helps out when needed. He shared how he feels so grateful because “my wife has developed a really good relationship with [other resident directors].”

On a supervisory and leadership level, Steve and the directors interviewed acknowledged the importance and value of getting to know staff as people first and encouraging them to live their lives outside of the position. As a direct supervisor of resident directors, Steve described a conversation he had this year encouraging a staff member to take care of themselves:

Even yesterday I had a staff member that has a partner that lives in California. It's like, "Hey, I've been down. I haven't seen my partner in a while." I was like, "You know, COVID cases are kind of down. If you feel like you want to take that risk, there's direct flights to California to LAX, and the flights aren't too bad right now. I have a friend that just came back. She went there and back. She was in a row by herself on both flights." She's like, "Really?" I said, "Yeah. Do me a favor. Go look in on an airline and tell me what you find, and let me know." I can't tell her to book that flight, but at least tell me

that she did look into researching the flight and how much. And if she wants to take the opportunity to take it, great.

Steve recognized that he cannot force a staff member to take care of themselves, but what he can do is provide space to have these conversations and plant seeds around how it is okay to prioritize yourself over the job. As leaders within the department, there was a general understanding that what matters to resident directors matters to senior leadership. Emma, the director at Northeast, said she encouraged staff to pursue their passions and be intentional in cultivating personal relationships. It is important to her in “putting value in the things that [resident directors] value.” For Khloe, her mentality in getting to know staff as people first meant her initial questions to new staff are not about work. Instead they consist of questions like “Tell me about your family. Tell me about what your...” to get to know what they value. She continued these conversations over lunch and stated that one tradition she appreciated but missed because of COVID, was being able to have lunch daily with her staff. Clare, a resident director who works for Khloe, valued these opportunities to connect, including bonding with staff “a few time a semester as a department...including the central staff [going] to trivia nights [at local bar].” Clare who had challenges at times with wearing “18 hats and hav[ing] multiple different types of responsibility” also talked about the “deep investment in relationship that goes along with working in a small college” and being able to contextualize colleague’s personality in a situation where you “find a certain procedure frustrating.” What was very apparent was that having strong, positive relationships, where there was an investment in knowing someone outside of the role, helped to foster a workplace culture where staff felt invested and cared for, ultimately supporting their well-being.

### ***Role modeling Healthy Behaviors is Important***

Across all of the participants' shared experiences, it was clear that role modeling is important and matters to the live-in staff experience. Barbara, Emma, Khloe, and Steve all understood their influence as leaders within their department to set boundaries and initiate conversations with resident director staff around how they are taking care of themselves. For Khloe, being able to create a culture where staff can tend to their personal needs during the workday came in part from receiving that support herself from her supervisor (dean of students) and leadership above him. As Khloe shared, "[they're] so understanding and flexible, so...I'm allowed to balance things as I see fit, and I'm not made to feel [guilty for doing so]." The support Khloe received influenced the culture she worked hard to create among her team in residence life. Live-in staff recognized and appreciated the flexibility and support Khloe provides them. As Katie said, "if we needed anything from [Khloe], [she] would give it to us in a snap of a finger."

Staff at Southeast valued Barbara's priority on well-being and integrating one's personal life with their professional life. As noted earlier, staff appreciated the commitment Barbara held in both enacting and encouraging staff to take time during the workday to exercise or take care of other personal needs. Josh, who has been at Southeast for almost five years, referenced how a few years ago Barbara announced changes she was making to lead a healthier life. Her lifestyle changes included going to the gym more frequently and eating healthier. These two habits specifically crept into her workday habits, thus normalizing staff's ability to go to the gym during work hours. Josh reflected on the culture shift that happened as a result of Barbara's decisions, "the culture in our department changed... when your leader is role-modeling, you follow it."

Emma, at Northeast, found much value in role modeling healthy behaviors for her team. She recognized the work in student affairs can be “wonky and weird in that we talk out of both sides of our mouths,” so she strived to provide balance to the work and infused care into how she built relationships with staff. As Emma stated, “I try to be respectful of the office end[ing] at a certain time.” In doing so, Emma is mindful of the requests and outreaches she does to her resident director team after hours. Taylor spoke about how they experience internal conflict when wanting to take time off, regardless of whether it is a sick or personal day. Taylor said that they often felt guilty and that they needed to justify taking the time off. Taylor said that within the past year of working with Emma, they have felt more empowered to just take a day off without needing to share the reason why in their ‘out-of-office’ email because Emma reminds them that they “don’t have to say” a reason for wanting to “take time away for oneself.”

**Demonstrating Commitment to Work-life Integration is Important.** Recognizing that the resident director role is not confined to work between the hours of 9am to 5pm, many resident directors shared the appreciation of being able to integrate their personal life into their professional life and having supervisors support the integration of the two. Each of the directors talked about how the support they received from leaders above them made it easy to foster a departmental environment where staff are encouraged to integrate their personal and professional lives. For Barbara at Southeast, she spoke extensively about the “family first” culture led by their VPSA and how she was able to bring her children to work when there was a snow day without being made to feel guilty about having her kids in the office. Barbara also role modeled to the staff that it is okay to go to the gym during the day by placing ‘gym time’ on her open calendar so staff can see when she is at the gym. Similarly, Khloe openly shared that she cannot attend certain meetings when it conflicts with her child’s birthday or sports game. She also encouraged

staff to take time to tend to their personal lives. When a staff member offered to attend a meeting while visiting a partner, Khloe said “No. No. We can [manage]” For Khloe, it was demonstrating and not making “everything a big deal” since the work will get done, regardless of whether someone misses a meeting or takes time off to tend to personal needs.

Overwhelmingly, resident directors appreciated the culture that their department leaders strived to foster. As resident directors figured out how to navigate a culture of living where they work, having the flexibility to work out in the middle of the day, tend to personal appointments, or even grocery shop provided them with opportunities to not feel guilt in prioritizing their needs.

### **Sense of Belonging Matters to the Professional Experience**

Participants in this study overwhelmingly identified as white, with only three staff members identified as persons of color. To help further mask their identity, this section will speak generally to their experiences of working at their current institutions as a person of color, without identifying the institution. For participants who identified as persons of color, it was evident that race played a strong role in determining their sense of belonging, both at the institution and even in the larger surrounding community. Two of the participants disclosed problematic instances in which they felt discriminated against within their department. One participant was asked to create and deliver a social justice training for staff shortly after arriving to campus. While they believed the intention to delegate this training to them meant to show investment and trust in them as a staff member, the impact landed differently as they are the only staff member of color in their department. The other participant shared how they received “essentially a written warning” after a colleague filed a complaint against them for talking about their religious beliefs in the workplace. For them, they “wanted to work with students who

identified strongly with their faith, but it felt like the more I tried to do that, the more I was limited in that way.” Both of these individuals cited that these negative experiences “impact[s] well-being” and prompt reflection on their sense of belonging within their current departments. While the third participant did not disclose negative departmental-level experiences, they shared how there were challenges with working with people at the institution who held very different ideological beliefs than them. Through conversation with all three participants, it was evident that for them, their identities influenced their professional experience and sense of belonging at their institutions.

### **Conclusion**

Individuals today entered the profession for many of the same reasons individuals began their careers as resident directors decades ago. Staff have a deep commitment to working with and supporting students. Many of the participants, who entered as resident directors, enjoyed being able to live on campus because it provided them with an opportunity to connect with students on a deeper level and to better understand the student experience. Working as a resident director provided much satisfaction and meaning to staff’s professional selves. Staff at all levels, entry, mid, and senior level, valued the personal and professional relationships they built with colleagues across campus and the comradery they foster with their residence life colleagues who truly understand what it means to do the work they do on a daily basis. Throughout many of the interviews, staff at all levels articulated how much they enjoyed and have a passion for the general work they get to do, but the magnitude of the amount of work they were asked to do on a regular basis was unsustainable and contributed to their inability to fully care for themselves, which caused them to burn out and consider other career opportunities.

The tension points which most contribute to this point of frustration and exhaustion were the increasing frequency and level of support that staff were being asked to provide to students in crisis on top of managing the community development, supervision, and general administrative aspects of their work. Additionally, the lack of understanding campus partners have surrounding the roles and responsibilities of live-in resident directors contributed to the feeling that resident directors were “catch-all employees” lacking true value and purpose to the larger institution.

## CHAPTER 5

### DISCUSSION, IMPLICATIONS, & RECOMMENDATIONS

This research multi-site study explored the following question:

- How do residence life departments support a culture of well-being for their professional, live-in staff?

To help fully answer this question, three additional questions informed the design of the research study. These questions were:

- What practices do departments currently implement to support the well-being of their professional, live-in staff?
- How do senior departmental leadership perceive the support they provide to promote a culture of well-being of professional, live-in staff members?
- How do professional, live-in staff perceive the support for their well-being from departmental leadership?

This chapter will discuss the findings related to how residence life departments create a culture of well-being for their live-in professional staff. Three institutions participated in this research study. Two of the institutions are public, four-year, and the other institution is private, four-year. This case study was executed remotely. I met virtually, one-on-one, with staff members within each office of residence life including a senior leader and resident directors. At one site, I also met with a mid-level manager. All resident director participants participated in a photo sharing activity, and the photos were used as a means to prepare participants for their individual interview. Additionally, a document review of each site was conducted; however, due

to the lack of relevancy of the documents provided to the research topic, they were not included in the analysis in chapter four. The lack of relevancy was because documents provided generally referenced college students and were not specific to staff well-being. At two sites, the senior leader in the department shared documents, and at the third site, I only conducted a cursory search on the institution's website to find relevant documents as the site did not share documents. In the sections below, I will share a summary and discussion of this study's findings, limitations of this research study, implications for practice, and recommendations for future research. I will structure the discussion section using the three organizational frames that were used to frame this research study and analyze the data. As a reminder, these are Manning's (2017) bureaucratic, organized anarchy, and spiritual organizational frames. Within each discussion sub-section, I will highlight how the study's findings address aspects of well-being according to the World Health Organization's (1958) definition of health. The WHO's definition of health consists of three well-being dimensions – social, mental, and physical.

### **Summary of Findings**

This multi-site case study explored how three residence life departments support a culture of well-being for their live-in professional staff. To fully answer this question, attention was paid to understanding practices implemented that affect staff-wellbeing, the role senior departmental leadership perceive themselves having in cultivating this culture, and the perceptions of live-in professional staff related to how departmental leadership supports their well-being.

All participants decided to participate in this study for two reasons. The first motivating factor was the recognition that taking care of your own well-being, and supporting the well-being of those around you, is important and should be a priority, even if it is sometimes hard to practice holistic well-being. The second motivating factor was that while many of the resident director

participants expressed feeling exhausted from the work, they persisted and had a desire to change the culture because of the investment they had in working with and supporting college students in residential settings. Along with the investment in working in residence life was the recognition that being a resident director means embracing a particular lifestyle, one that requires nightly commitments and serving in a crisis response on-call system. Given this, resident director staff also valued having positive relationships with senior leaders, who demonstrated investment in them as young professionals and role modeled appropriate work-life integration behaviors.

Two specific tension points of being a live-in staff member emerged from this research study. The first tension point stemmed from campus partners having a lack of understanding of the purpose of resident directors on their campus, which resulted in RDs being delegated tasks from campus partners or asked to help with other office's work responsibilities. The second tension point is serving as a primary support to students in distress, both in the on-call rotation and in their daily work. This level of support that RD staff were expected to provide exhausted many of them and contributed to burnout.

There were also notable differences in participant's experiences across sites. Specifically, the experiences of resident director participants at New England and Northeast differed than the experiences of participants at Southeast. In part, the differences were because New England and Northeast staff felt stretched, in terms of daily work responsibilities and needing to put in long hours, which were attributed to institutional budget constraints and being short-staffed.

Additionally, there were notable differences in participants of color experiences and narratives shared during the interview. Overall, the staff of color had experiences that varied from that of their white colleagues, which most notably influenced their sense of belonging in the department and at the institution. Katie, at New England, provided examples of where she had

been tokenized as the sole person of color on staff. John, at Southeast, focused more on discussing staff policies and protocols which have influenced his well-being versus discussing the influence of the work itself on his well-being. John acknowledged himself as an outlier within the resident director cohort, not spending much time with the larger group given both previous negative experiences and being a new father with another child on the way soon.

### **Discussion**

This section will discuss how departments of residence life foster a culture of well-being for their live-in, full-time professional staff, using Manning's (2017) bureaucratic, organized anarchy, and spiritual organizational frames as the guiding structure. To best illustrate the effect that external influences have on departmental culture, I will first discuss the findings as related to the spiritual theme on a departmental level, followed by moving to a divisional and institutional level to discuss bureaucratic influences and then wrapping up the section discussing how principles that embody an organized anarchy frame contribute to a lack of well-being and burnout from the profession. Within each of these frames, attention will be paid to how mental, physical, and social health are tended to within the working and living environments of resident directors, thus incorporating the World Health Organization's (1958) definition of health.

Participants across all three sites provided examples and narratives that reflected the three organizational frames listed above. In their experiences shared, they highlighted how people and organizational values influence their work, and when people enter or leave their institution, it impacts their work directly. The examples mentioned echoed what Pantel and Yakaboski (2014) describe in stating that that institutions are complex and shaped by the experiences of people, organizational values, and other influences. Both resident director and mid/senior leader participants discussed the care and supportive environments that is cultivated within their

departments. However, the challenges of navigating the bureaucracy of the larger institution, responding to external influences, and encountering a lack of helpful partnership from other campus offices diminish the value of the efforts put into creating a supportive departmental environment that cares about its resident director staff.

### **Spiritual Frame: Developing Relationships as People First, Employee Second**

The emphasis on having positive relationships with departmental colleagues, and even from other areas of campus, was a salient value that all participants mentioned in their interviews. Given that, historically, the primary purpose of the resident director is to develop relationships, support student development outside the classroom, and facilitate community building (Astin, 1999; Frederiksen, 1993), the value participants had in building relationships with colleagues is not surprising. Spiritual organizations incorporate the perspective that there is much value in establishing relationships, and having healthy workplace relationships can help members work towards a common purpose and find meaning in their work (Manning, 2017). Research in general suggests that positive workplace relationships and feeling supported by leadership are integral in enhancing individual well-being and retaining staff (Belch et al., 2009; Grawitch et al., 2006). For Khloe, establishing good relationships with her RDs begins as soon as they first arrive. She shared that in order to begin to build trust and understand what individual staff members value, her first questions to new staff are not about work. Rather, Khloe asks questions like “Tell me about your family. Tell me about ...your [hobbies].” Emma also shared a similar approach in “putting value in the things [RDs] value” such as encouraging staff to go further in their reiki training or spending time with their new fiancé. Taylor at Northeast joked that while they do not consider their colleagues as friends, the reality is they are more like family. They are the “group that has a meeting after the meeting” that determines “how are we

going to navigate this?” In other words, they are figuring out how they are going to respond as a united team ensuring they are all on the same page moving forward. John said that it is the “kind people” that keep him at Southeast, and Clare discussed how building strong relationships with colleagues on a personal and professional level can help contextualize situations where their behavior or a procedure they uphold is frustrating. For participants, it was the positive relationships they had with colleagues that served as a motivating factor in keeping them in their roles. These interpersonal relationships also positively influenced their social and mental well-being as participants found that the relationships helped them cope with daily stressors and provided meaning to their work. The abovementioned findings reflect what is shared in the literature as it relates to developing workplace relationships and supporting staff well-being (Grawitch et al., 2006; Manning, 2017).

### ***Role Modeling Work-life Integration***

For resident director participants, their positive relationships were also influenced by observing and experiencing the effects that their leaders’ behaviors had in the workplace. Organizations that incorporate a spiritual perspective recognize that employees “bring the whole of themselves” to work (Manning, 2017, p. 178). Both New England and Southeast universities embraced a ‘family-first’ mentality, which meant that if staff needed to use time during the workday, within reason, to run errands or tend to family matters (e.g., attend a child’s play), it was culturally acceptable to do so. At Southeast, Barbara added to her calendar her fitness workouts, which occurred during work hours, and encouraged her staff to also go to the gym during the afternoon. There was a collective mentality among all departmental leaders interviewed that if you need to take time during the day, you make up the work at another point. Resident director staff appreciated this. Josh specifically shared his appreciation of Barbara’s

transparency in that she is “working my job into my life the same way you are. And so don't take what I'm doing [e.g., sending email at 10:00 PM] as an unspoken expectation [for you to respond at 10:00 PM]”. Similarly at Northeast, Emma tries “to be respectful of the office end[ing] at a certain time.” Department leaders recognized that their choices mattered, and their choices had a direct impact on the well-being of their professional staff. Supervisors role modeling healthy behaviors and staff being encouraged to embrace work-life integration on all levels support the literature (Manning, 2017; Palmer et al., 2001). Being able to practice work-life integration allowed for staff to find ways to care for their physical, mental, and/or social well-being, thus providing them opportunity to take care of themselves in ways that are articulated by the WHO's (1958) definition of health.

### ***Marginalized Identities Influence Sense of Belonging***

An important concept of the spiritual frame is being able to bring all parts of your identity into the workplace to develop meaningful relationships and perform work that is in alignment with an individual's personal values (Manning, 2017). Being able to bring your whole self into work is easier for some individuals more than others, and this was salient in my interviews with participants of color. While participants of color valued the relationships they had with colleagues and found great meaning in working with students, they sometimes were not able to be authentic within the workplace. Two of the participants of color shared about how their experiences at their current institutions contributed to their burnout and fatigue, but for different reasons. One participant felt burned out more because of their inability to bring their religion into the workplace than from feeling marginalized because of their race. They felt like they had to hide a salient part of their identity in order to avoid job action and further alienation from colleagues. Another participant felt taxed in bringing their authentic self into work. They felt

internal dissonance in being asked to lead the racial and social justice work in their department but also wanting to do it in an attempt to change the culture for students with marginalized identities. The conflict between wanting and being asked to advance racial and social justice work contributed to their lack of sense of belonging. Negative experiences in the workplace serve as a social determinant of health and can negatively impact how one is able to take care of themselves - mentally, physically, and socially (Centers of Disease Control, 2018; World Health Organization, n.d.). Both participants highlighted how their experiences contributed to their burnout and, subsequently, lack of mental well-being.

### ***Conclusion***

Having positive, healthy relationships was central to the staff's satisfaction with working in their current departments, as was being able to integrate their professional and personal lives. Despite frustrations expressed with specific role responsibilities and external partners, resident director staff strongly valued the emphasis on relationship building with other professional staff since relationship building is core to their work with students. Staff also appreciated and recognized that work-life integration is important if working in residence life where the work can be chaotic and days can be long. The pairing of these two factors, relationships and emphasis on work-life integration, created environments where staff were able to care for their mental, physical, and social well-being in ways that encompass what is defined in the World Health Organization's (1958) definition of health.

### **Bureaucratic Organizational Frame: A Cog in the Machine that Provides Intentional Care**

According to Manning (2017), "bureaucracies are the antithesis of the spiritual perspective. Where bureaucracies limit thought and initiative, spiritual organizations seek to humanize and include all" (p.188). At all three sites, there was tension between the culture that

staff in residence life were working to nurture and the external forces from elsewhere in the institution and outside the institution that influenced the day-to-day experiences of staff members. Bureaucratic qualities that had a greater impact on and were noticed more by participants included hierarchical structuring, focus on quality customer service, and feelings of being, as Clare shared, “overworked and underpaid.” The focus on customer service is in response to the changing campus demographics and socio-political issues, which contribute to the long hours and specific responsibilities that resident directors are asked to execute (Dungy, 2003; Nguyen et al., 2018).

### ***Bottom of the Pecking Order***

“Other duties as assigned is a big part of [the] role of having to work late hours, weekends,” according to Sean. Additional work was not just limited to tasks that arise after hours; participants also shared how they felt like a “cog in the machine” through being delegated responsibilities from staff who left or needs that arose because they were at the bottom of the hierarchical chain. This idea of delegation occurring based on their placement in the institution’s hierarchy reflects the bureaucratic frame as their voices might not influence policies and protocols as much as more senior staff members (Manning, 2017). The hierarchical organizational structure has existed within residence life for decades, where resident director staff typically assume many of the front-line responsibilities that serve students (Upcraft, 1993). Resident director staff at two of the sites discussed how they felt challenged in having their voices heard. Cathy said that despite having a couple of years of experience post-masters, her voice was at times dismissed because she was a newer staff member at Southeast. She provided the example of how she made a suggestion to change an on-call responsibility but was not heard. When a more senior resident director made a similar suggestion, the leadership team responded

with “we decided that this now needs to be a thing based off of this person's situation.” Taylor described how the on-call structure and other aspects of the work were resulting in burnout and reported telling leadership that staff would be “sitting here next year if we continue the way that we're doing.” Taylor said that this “hit home a little differently” and change was coming to the system at Northeast. The long hours and demands placed on resident director staff based on their placement within their institution had negative impacts on how they were able to care for their well-being holistically. By working long hours, staff struggled to eat nutritious meals, unless they meal prepped at the start of the week. Staff also felt exhausted to the point of not wanting to socialize with friends after work and experienced mental fatigue.

### ***Crisis On-call Approach or Concierge Service?***

In recent times, institutions have become increasingly more focused on delivering quality service to their customers (e.g., students) (Collins & Hirt, 2006), and this emphasis has directly influenced the work of staff in residence life. As Josh reflected, he realizes that part of his job is to provide an experience to students that they will not receive living off campus. Part of the services that staff provide to residential students is the high-level support in response to their mental health needs. Steve described how at Southeast they have put a lot of work into their crisis protocol that is “high touch, high impact” in nature and that many “universities are actually adapting our protocol.” While this protocol provided intentional support to students in distress and other affected students, it came at a cost to staff’s well-being. Cathy shared how it is the on-call responsibilities that both frustrated and exhausted her as “it often gets put on on-call staff to do everything.” Magnolia expressed similar sentiments in that the demands of the on-call role were often the driving reason behind why “positions become vacant,” because it was balancing supporting students in crisis while functioning as a “concierge service.” Emma, who has been in

the profession since the early 2000s, has observed the evolution in our field of how “increasing customer expectations” has directly influenced the work to the point of not supporting the well-being of staff at times. Resident director participants acknowledged that the on-call and crisis response responsibilities of their position negatively impacted their overall well-being. The evolution of the responsibilities with serving on-call as described by participants support the bureaucratic organizational concept that the interests of an organization take precedence over the interests of employees (Manning, 2017).

**Quality Customer Service Feeds Staff Entitlement.** The evolution of the profession was a topic discussed at all staff levels of participation throughout data collection. Steve and the three department leaders acknowledged that they had had a particular kind of experience as resident directors, but also recognized that the system needs to change in some ways. Khloe stated that she did not have “this much administrative workload...as an RD,” and she was “annoyed in the early 2000s” with the amount of administrative responsibilities she had then. At the same time, there was a collective agreement among non-resident director participants that entry-level staff bring with them some sense of entitlement; they often believe they “should sit at more tables than they sit at” and “deserve more amenity” in their living accommodation. This sense of entitlement can create friction and frustration, but as Emma shared it is “our own fault,” because as a profession, we have provided “all the customer service, all the catering, all the concierge, all the amenities, all the nap pods, all the things that we are trying to do to be the ... best... institution out there.”

### ***Long Hours and Perceived Insufficient Compensation***

In addition to frustrations with the workload, the topic of compensation was frequently discussed in interviews. While staff recognized that the job of a resident director was more of a

lifestyle than a job, there was a trend that many felt “overworked and underpaid.” Clare shared how “it's fundamentally unjust to think that people are going to put in this many hours and that it's [al]right to pay them \$32,000.” Other staff interviewed at two of the sites talked about how they had issues with paying for even essential items at times. Resident director participants navigated dissonance between finding meaning and value in their work intangibly through working with students but not feeling like they earned a fair salary. From a leadership perspective, Barbara acknowledged the friction around compensation conversations with resident directors, particularly since Southeast’s starting pay is \$37,500 for resident directors. She views the other incentives, meal plan, and an apartment with utilities provided, as sufficient compensatory benefits on top of the salary. However, resident directors do not always see these added benefits as worth it. Clare, at New England, shared she would appreciate additional money over a meal plan since she does make use of her full meal plan. Additionally, living in can bring restrictions and constraints that living off campus would not involve. Resident directors at Southeast were frustrated with an institutional policy that prevented them from having pets. Having a pet, they believed, would help them manage stress and contribute to their well-being, so not having that choice felt like one more way that the institution was not supporting them in their role. This echoes previous recommendations to address burnout, and subsequently attrition from the position, which have included rewarding staff with additional compensation, investing in quality accommodations, and implementing supportive staffing policies (Palmer et al., 2001; St. Onge et al., 2008). For staff, sufficient pay and the implementation of a supportive pet policy can positively contribute to their well-being. Sufficient compensation allows staff to pay for basic necessities and social outings, which supports all dimensions of their well-being. Staff who

had pets discussed how having a pet positively affected their mental well-being as it was something they could care for and get emotional support from after a long day.

### ***Conclusion***

The profession has evolved in ways that continue to meet the changing needs and interests of students and their families, offering high-level support and quality customer service (e.g., bringing additional pillows to COVID quarantine housing at midnight, answering front desk calls via the duty phone) among the array of amenities that are now baked into the on-campus experience (e.g., nap pods, fancy fitness centers, modern suite-style residence halls). This evolution has come at a cost, and the burden to execute much of the support and customer service work is often delegated to resident director staff through their on-call responsibilities and other duties as assigned. The compensation package provided to RDs often frustrates them given additional responsibilities delegated and work required of them after business hours. A principle of bureaucratic organizations is that they hire individuals committed to working towards fulfilling the mission (Manning, 2017). Staff shared how they were in their positions because they found much value in them and held a passion for working with college students. However, this passion was not enough for some resident director participants, who struggled with the tensions described and were in the process of considering what other opportunities might exist for them outside of residence life. As Josh shared, “we’re all disposable. And [as said in] *The Devil Wears Prada*, ‘there’s a million girls who would kill to be in this job.’” Despite recognizing that they are easily replaceable, which is a characteristic of bureaucratic organizations (Manning, 2017), resident director participants interviewed were committed to working with students, and they desired to “make things a little better” in terms of what it means

to be a resident director for their successors. Participants expressed hope that their successors would have an easier time taking care of themselves while also doing the job.

### **Organized Anarchy Organizational Frame: Losing Sight of Resident Directors' Purpose**

Higher education institutions have long been categorized as organizations that embrace the organized anarchy frame where a dichotomy between concern of individual rights and community obligations exist (Manning, 2017). In speaking with participants, it was clear as to why. The perception that resident directors feel as though they are “catch-all” employees at the institution coupled with the chaotic nature of serving on-call and working odd hours lends itself to feeling like one is working within an organized anarchy. Resident director staff, in particular, felt that their safety and well-being were second to that of students, and at times overlooked, particularly during the past year of managing COVID response on their campuses. Additionally, staff at each site shared examples of how time and time again they are asked to support campus programs (e.g., doing a cooking demonstration) or other office needs (e.g., operating the mailroom, processing CARES Act funding), making RDs feel like “you're needed when you're needed and you're expected to help out, but it's on their terms, not yours.” In being asked to do this additional work, participants also acknowledged they felt they were being asked since they already lived on campus. They recognized that since they lived on campus, it made sense campus partners might see them as obvious colleagues who could do after business hours work. The perception that campus partners might hold, and the tasks they may ask of RDs, fit within the organized anarchy principle of work requests being unpredictable yet rational (Manning, 2017). As RDs may not anticipate the requests that will be asked for them, they do recognize that as staff who live on campus, they are seen as staff who can likely support after hours work and other special assignments from other offices. Additionally, given that a primary responsibility of

RDs should be building community among residents, it makes sense that they could support with work that meets student needs and interests (Collins & Hirt, 2006; Schroeder & Mable, 1994). However, the idea that they, resident directors, were always available to support other departments both during and after traditional work hours negatively impacted their well-being. Staff described the exhaustion they felt which impacted their overall ability to take care of themselves.

### ***Staff at All Levels Acknowledge Campus Partners' Confusion with RD Role***

All the department leaders shared in some way that they realized that their staff were asked to help out in ways that were not always manageable. Barbara shared with her staff when she pushed back on campus partner requests because she realized her RD staff felt like she was “always taking from their cup,” so she tried to “fill their cup” by pushing back and letting them know that she has. Similarly, Khloe and Emma also acknowledged times in which they advocated for their staff. Advocacy and support from department leadership did not go unnoticed by resident directors, who feel like if they ever “needed anything from” their department leaders, they could ask for it. Despite the support from departmental leadership, the disconnect staff felt came from campus partners. Magnolia mentioned how the job of a resident director is not the hardest on a college campus, but it is “one of the most misunderstood.” This is largely because faculty and staff, particularly but not exclusively outside of student affairs, do not realize that resident director staff are full-time professionals, often with advanced degrees. Clare had an interaction with a faculty member at a meeting who first assumed she was a student before proceeding to tell Clare post-meeting, “I didn’t realize you work here and have some expertise,” reflecting the lack of understanding that often exists about resident director staff roles on a campus. In resident director participants sharing their experiences of working with campus

partners, they also described the mental exhaustion they felt that was a product of either “wearing 18 hats” or not being understood in their roles on campus. The lack of understanding of the purpose of the RD role is symbolic of the idea of fluid participation within an organized anarchy, and because of fluid participation, there is a subjective understanding of what a RD does based on an individual’s position within the institution (Manning, 2017).

### ***The On-call Experience in the 21<sup>st</sup> Century***

Being a first responder for frequent high-level situations and serving as a “concierge service” for students were consistent themes across resident director experiences. Similar to many other aspects of the RD job, the purpose of serving on-call has also shifted over the years (Collins & Hirt, 2006; Riker, 1993). Fluid participation at institutions, and arguably within the field due to attrition and other staffing factors, has contributed to a lack of clarity in the purpose of what it means to serve on-call (Manning, 2017). Whereas once only an emergency response, participants provided many examples of both the increasing severity of crisis calls and the increase in customer service requests for things like additional pillows or midnight check-ins. On the crisis end of serving on-call, resident directors talked about the late nights they worked while on-call, responding to incidents of domestic violence, sexual assault, and suicide ideation, sometimes multiple incidents in one night. As Josh shared, for the specific student you are responding to, their mental health crisis is a “huge deal and it’s really scary” despite you, as the staff member responding, being desensitized and burned out from the cumulative response you provide. Magnolia described the concern RDs at Northeast feel when they get a call about a student “found on the parking garage” roof since that has previously been a location of death by suicide. In situations like these, residence life staff and campus partners, such as campus police

and the counseling center, work together to respond quickly and provide comprehensive support to the students impacted.

However, there are times, particularly when the more “customer-service” requests come through, that on-call staff experience a lack of willingness to support from other campus partners who view it as not part of their job. In hearing the descriptions from participants, this could be associated with the fluid participation of staff members at the institution, which is accompanied by communication challenges and varying levels of understanding of existing protocols (Manning, 2017). For example, Magnolia also described how he responded to a lock-out after attempting to see if campus security could help. They said they could not, but on Magnolia’s drive to the other side of campus, he noticed two campus security cars with officers just hanging out in parking lots. Magnolia did not see the officers up close, so for all Magnolia knew, the officers spotted could have been new to the institution. Cathy explained that following the retirement of the department’s front office administrative assistant, the main office phone was forwarded to the RD on-call number. This was around the time Southeast decided to postpone move-in due to COVID-19, so there were more calls than usual to the housing office asking questions around things like move-in plans and information about canceling housing. On top of their usual community responsibilities and after-hours crisis calls, the on-call staff member was now also expected to handle all calls that came into the main office phone. Cathy said that this was exhausting, and when she was on-call took the initiative to ask her fellow RDs for support in holding the phone. This approach “became the standard” and contributed to the mentality among RDs to “help each other...[and] work as a team,” according to Cathy. The stress of serving on-call and responding to sensitive situations affected staff well-being. Participants said that serving on-call specifically negatively impacted their mental well-being. According to the World Health

Organization (n.d.), when even one dimension of your health is not well, it can negatively impact your ability to care for your other dimensions of health in sustainable ways.

### ***Conclusion***

Over the years, the changes in staffing have contributed to losing perspective of the role of the resident director on a college campus. There is an increasing emphasis on tending to community obligations (e.g., interests of students and families) over the investment and protection of individual staff at times. This occurs in staff from other departments asking for help from resident director staff, the expectation that RDs provide quality customer service, and that RDs also respond to a much higher volume of sensitive student issues while on-call and in their daily work. This shift is directly impacting staff satisfaction and well-being, causing staff to either leave or begin to job search outside of the field.

### **Discussion Conclusion**

Over and over again, I heard from participants how much they enjoyed working with their colleagues, and their strong appreciation and value for the relationships they formed with colleagues. As Taylor said explicitly, their colleagues were like family, and other participants alluded to this sentiment in indirect ways through talking about how much they care about their colleagues as individuals and how they value the life advice from supervisors. Another positive and salient takeaway across participants' experiences was the value and meaning they found in working with college students. There was a general understanding that being a resident director is a job, not a lifestyle, and participants recognized that some evening and weekend commitments were a part of the job.

However, it was the amount of after-hours work and inability to flex time during the day that exhausted resident director participants. The extent to which these individuals supported

students in crisis on a regular basis coupled with customer service needs that arose while being on-call burned staff out and hampered their ability to take care of themselves mentally, physically, and socially. The lack of understanding by campus partners about the purpose of the resident director on their campus lent itself to campus colleagues asking for the support of residence life staff in delivering their office's work. Additionally, the lack of understanding of the role of resident directors also meant that when special needs arose (e.g., COVID response) the work fell to them given that they live on campus and the need or project did not clearly fall within the perimeters of another department's function.

Despite department's leadership best efforts in creating a workplace culture that supports the well-being of live-in, professional staff, external forces often mitigated these efforts. Resident director participants all valued their department leaders and spoke highly of them, and they also shared practices their leaders implement that are meant to support them (e.g., comp time, encouragement of taking time for personal needs during the day, disconnecting at close of business). However, despite resident directors receiving this support, they felt pressure from campus colleagues and students to perform the work as described above and were at a loss on how to improve the overall situation.

### **Limitations**

This research case study focused on how residence life departments cultivate a culture of well-being for their live-in, professional staff. Three institutions participated in this study, and I met with three to five participants at each site for a total of twelve individual interviews. As shared in chapters three and four, this multi-site case study was conducted remotely due to COVID-19. I used Zoom, a video conferencing platform, to conduct each of my interviews. While the interviews resulted in providing rich data with what the participants verbally shared, I

was not able to watch for non-verbal cues in ways that I would have been able to in person. Additionally, conducting an in-person case study means you often pick up on how different staff members interact with one another, thus supporting your findings or creating concern for genuineness in what is shared. When initially conceptualizing this case study as being conducted in-person, I anticipated being able to observe campus environments (e.g., staff apartment, office space, outdoor aesthetic) to also serve as findings. All of these informative components were not included since this was a remote case study, which meant I relied fully on my methods of data collection to inform the analysis of my findings and discussion. Finally, many of the participants identified as white, cis-gendered individuals. For the participants that identified as a person of color, their experiences were, at times, influenced because of their race. The few participants of color, and their different racial identities, limits the insight we can gain into that experience on how identity shapes how an individual benefits from a culture of well-being within a department of residence life.

### **Implications for Practice**

This research case study explored how three departments of residence life support a culture of well-being for their professional, live-in staff. To examine how this culture is fostered, I asked questions to understand the practices departments implement to support well-being, how senior leadership perceives the support they provide to live-in staff, and how live-in staff perceive the support they receive from senior leadership. I learned through this study that there is intentional effort demonstrated by senior, and mid-level, department leadership to foster a culture of well-being for professional, live-in staff. This culture is fostered through the formation of personal-professional relationships and demonstrating positive role modeling behaviors such as incorporating management of personal needs into the business day and limiting email after hours.

Additionally, benefits such as comp time, implementation of pet policies, and other fringe benefits to compensate for low salary are also appreciated by staff and support well-being, although a higher salary is always appreciated given the work required of resident director staff. Resident director staff overall both acknowledged and appreciated the emphasis on relationship building, level of support they received from supervisors, and certain staff policies and benefits, thus supporting existing research that demonstrates the value in these practices in promoting a culture of well-being for staff (Chessman, 2021; Preston et al., 2021).

Based on the tension points collectively experienced by resident director participants, some of which were also acknowledged by senior leadership and reflected in literature, my recommendations for practice consider both institutional and departmental changes to the position to better support the well-being of professional, live-in staff. To structure this section, I will first share implications for practice as it connects to institutional/divisional organizational workflow, followed by departmental staffing practices, recommendations for cultivating a culture of well-being on a live-in staff level, and supports for departmental leadership to consider adopting.

### **Institutional/Divisional Organizational Workflow**

The employment of resident directors on U.S. residential college campuses to support student development outside the classroom has existed for many decades (Astin, 1999; Fredericksen, 1993). While initially the role was conceptualized to build community, create physically and psychologically safe living environments, manage daily operations, and serve as an “adult” presence in case students had an emergency, the role has significantly shifted since the turn of the 21<sup>st</sup> century (Collins & Hirt, 2006; Nguyen et al., 2018). Now, individuals who hold the position are expected to respond to more severe levels of student crises, in part influenced by

the changing characteristics of incoming students, such as more students requiring support for their mental health (e.g., anxiety, depression) (ACHA, 2019; Lin et al., 2016). Additionally, national events (e.g., mass shootings and its impact on mental health and safety on campus) and changes in federal law (e.g., Title IX) also have significantly influenced residence life professionals work with students (Nguyen et al., 2018).

Similar to the evolution of the residence life profession, the larger field of student affairs has also experienced significant change since the mid-1900s with the expansion and creation of functional areas to better meet the needs of students (ACE, 1949; Gerda 2006). These functional areas, initially few in number, have grown to about forty functional areas in recent years, depending upon how someone might categorize a student affairs functional area (CAS, 2019; Wesaw & Sponsler, 2014). While not every institution may have forty plus departments within student affairs, there are generally multiple departments within student affairs divisions along with robust collaboration expected of student affairs staff with academic affairs and academic administration staff (Kezar & Lester, 2009; Wesaw & Sponsler, 2014). In line with recent research, there needs to be a reexamination on a divisional/institutional level of how work is being delegated and operationalized and by whom within the organization (Preston et al., 2021).

A general held belief within the field of residence life is that over the past several decades we have continued adding work to our portfolio to continue meeting the needs of the students we serve at the time, but never removing responsibilities from our portfolio. Some might casually hypothesize that the same is true across the field of student affairs. In other words, as a larger field, we more often add new responsibilities, and even new functional areas, to meet the changing needs of students, but do not critically examine what within our work can cease to exist

because there is no longer a need or whether we should reconsider if it is the responsibility of an institution to provide those services to students.

As illustrated throughout this dissertation, resident directors at each of the sites referenced feeling they were the “catch-all” employees at their institution, able to help with any task that arose based on their positioning within the hierarchy and lack of understanding by campus colleagues of what a resident director’s job purpose entailed. There are two recommendations institutions could implement to better understand how this perception came to exist.

### ***Divisional Audit of Student Affairs Work***

The first recommendation is to engage in a division wide exercise that requires staff members, either individually or with those that hold their same title (e.g., resident director, assistant director of student activities) to write their own position description listing all their responsibilities. From there, convene a workgroup to analyze the position descriptions and identify all the different responsibilities listed, determining overlap of responsibilities in different offices and among separate levels of staff. The workgroup should then hold several meetings where participants discuss the areas of work that must exist to support student success whether it is due to law or institutional values, the areas of work that enhance the student experience, and the areas of work that exist but might no longer be serving its purpose in the third decade of the 21<sup>st</sup> century. For the latter two, there might be overlap, in which case further philosophical discussions should occur. It may also be beneficial to bring in relevant stakeholders to contribute to the conversation depending on how you structure the meetings (e.g., whether meetings are topic-focused or a general discussion). The workgroup should form recommendations of practices and services that must continue, should be reconceptualized, or should be terminated.

New needs may also emerge from the workgroup, and participants should share those ideas as well. The recommendations from the workgroup can inform the redistribution of work among employees in the division.

Divisional leaders should bring staff together to share the recommendations of the workgroup and hear their feedback before making final decisions around how to redistribute existing work, cease outdated practices and services, and implement new ideas. In this conversation, it is important that divisional leaders are explicit in stating that changes that occur will not result in positions being cut, unless that is a possibility. This statement is important because an initial inclination of staff might be that there is a possibility they could lose their job depending on any changes that occur as a result of the workgroup's recommendations. In implementing changes based on recommendations, it is important to emphasize the purpose and responsibilities of positions to all employees so individuals learn the differences in positions, which might help them make intentional choices in who to collaborate with in the future.

### ***Institutional Support from the Beginning***

The second recommendation needs to occur on an institutional level and is inspired by an idea Clare at New England shared in her interview. A common opportunity that nearly all, if not all, employees have at many institutions is participation in an on-boarding session through Human Resources shortly after joining the institution as a new employee. Resident directors are in a unique position at institutions that have a requirement that students must, excluding specific circumstances, live on campus for at least their first year. As such, departments of residence life may boast to campus colleagues of being one of the only, if not only, office to have a touch-point with nearly every student at some point in their collegiate journey. Human Resources can use this fact in describing the purpose of residence life and the different positions, specifically of that

of a resident director, to new employees. Human Resources should communicate this information in a way that makes it clear that resident directors are staff members who are a conduit to students and can help answer questions or share resources to students. It should be clear to new employees that resident directors are not staff who can take on additional responsibilities just because support is needed in other offices.

### **Departmental Staffing Practices and Supports**

Along a similar vein to the first recommendation on a divisional level, departmental leadership within residence life should also reexamine the purpose of the resident director role in the 21<sup>st</sup> century on their campus. As mentioned, the departmental directors, and even Steve, the assistant director interviewed, all practice positive behaviors and approaches that help to cultivate a culture of well-being that is in line with recent research published (Chessman, 2021; Preston et al., 2021). If, on a divisional level, redistribution of work is not possible, there may be merit in auditing and reconceptualizing the resident director position within the department's structure. All resident director participants, and even some of the other staff members interviewed, shared that they entered the field of residence life because it provided them an opportunity to work with students in meaningful ways. What drains the well-being of many of the resident director participants is the extensive responsibilities attached to what it means to be an on-call professional. While they recognize the importance of supporting students in distress, the institutional expectation of high-level, high-touch not only negatively impacts their well-being but also limits the time they have to create a flourishing community within their residence hall (Collins & Hirt, 2006; Fredericksen, 1993).

### ***Diversify Types of Resident Director Positions***

As such, department leaders should consider diversifying the types of resident director positions that exist within their department. While a full-time, live-in staff member could still be assigned as the contact for a specific residential community for needs that arise during the business day, there could be a cluster of resident directors within the department focused on student staff development and community development, whereas other resident directors specifically focus on managing more of the high-level care needs residential students have. In essence, these latter resident directors would be pseudo-case managers; thus, departments should also consider the educational backgrounds and practical experiences they are seeking in candidates for vacant positions.

### ***Reconsider Recruitment Practices***

Regardless of whether multiple, differentiated resident director positions are formed or a redistribution of work occurs on a divisional level, hiring managers should (re)consider how position descriptions are worded, vacancies advertised, and interviews are conducted for candidates applying to the resident director position at their institution. As learned through interviews for this research study, participants entered the profession because they had an interest in supporting student development outside of the classroom through building a holistic and welcoming community within their residence hall (Astin, 1999; Fredericksen, 1993). In a cursory look at entry-level, resident director positions on *higheredjobs.com* (2021), many still list primary responsibilities of the position to include staff supervision, community development, administrative responsibilities, and crisis response. While resident directors, even those interviewed, still find they are expected to perform all of these responsibilities, there is a sentiment that there is more emphasis placed on on-going crisis response and “other duties as

assigned.” Current resident directors should be consulted about the areas of responsibility that need to be considered and communicated, and interviews should be intentionally structured to ensure opportunities to evaluate candidate competence in those areas. Just as there needs to be a larger field examination of the work of student and academic affairs staff in the 21<sup>st</sup> century, there needs to also be a critical examination of how departments are recruiting staff, structuring the work of resident directors, and supporting staff in these positions in ways that are able to help them improve their well-being (e.g., recognition of whole person, flexibility in hours, comp time, pet policies) while continuing to meet the expectations of the position (Chessman, 2021).

**Candidate’s Role in Recruitment.** Job candidates should also take an active role in evaluating the culture and expectations of the department and larger institution of which they are interviewing for a position. To assess culture and expectations, candidates can ask questions that are catered to current resident directors or departmental leaders. Questions to current resident directors may include: How is the daily work similar and different to what is listed in the position description?; What is a tension point within the specific responsibilities of the role?; and What are ways you are encouraged by senior leadership to take care of yourself? For departmental leaders, candidates may ask: Which responsibility on the position description consumes the most time of resident directors?; How do resident directors actively support student mental health needs on your campus?; and How do you encourage staff to take care of themselves?

### ***Telling the Story***

Across site participants’ experiences was the perspective that campus partners lacked the understanding of what it meant to be a resident director. Considering that the role of many resident director positions is to work closely with other offices and serve on institution-wide

committees, more attention should be given to how are residence life departments telling the story of what it means to be a resident director (Schroeder & Mable, 1994). Residence life departments can help shift this narrative by being strategic in how they tell the story of the work they do to campus partners. Telling the story of resident directors' work, and the work of the department overall, can occur via multiple ways. Consider using departmental social media accounts to spotlight the work that resident directors are doing within their community. Ask for and utilize time at division-wide meetings to showcase the work resident directors are doing using pictures and anecdotes to bring the work to life. Schedule time to meet with various campus partners in small group settings to refresh your partnership expectations and use the time to communicate what it means to be a resident director on campus.

### ***People First, Employee Second***

The value in cultivating and maintaining strong relationships with colleagues at various levels was a salient theme across all of my interviews. Participants described how their relationships with colleagues gave them meaning and satisfaction in their current experiences. Department leaders should emphasize relationship building among all levels of staff, creating ongoing opportunities that allow for staff bonding. Direct supervisors and other department leaders should take time in getting to know who their resident director staff are as individuals and encourage, or even facilitate, opportunities for staff members at the same level to form relationships outside of doing traditional work (e.g., participating in trivia nights). In creating these relationships within a power-differential, department leaders should also share about themselves with resident director staff, so they can better get to know them as a person and not just their leader. Department leaders should also role model healthy behaviors in the workplace (e.g., taking time to go to the gym, tending to personal needs). Leaders should also work with

staff to develop healthy behaviors (e.g., not joining virtual meetings when out of the office, limiting email responses after business hours).

**Resident Director Accountability.** Additionally, live-in, resident director staff should work to form a culture where they encourage their peers to practice healthy behaviors and hold them accountable by calling them out when they work after hours or take on a project they might not be able to manage because of their existing workload. Resident directors should also engage with their supervisors in conversations around what they need from the department to help them take better care of themselves.

### ***Developing Professional Values as Entry-Level Professionals***

As younger professionals enter the field, supervisors should initiate a conversation, through one-on-ones or training sessions, that encourages newer professionals to reflect and consider how they will prioritize taking care of themselves in their new role. This is an important conversation to initiate, seeing that in order to take care of others (e.g., students), someone first must know how to care for themselves. Some of the resident director participants in this research study expressed this belief – that it was important to take care of themselves, so they were able to care for students. While resident directors have the responsibility to determine how they will take care of themselves based on their own needs, supervisors can play a critical role in introducing the topic and setting the tone for how staff can appropriately advocate for their needs. Supervisors can use this time to share examples of what they deem as appropriate versus inappropriate advocacy from a resident director. For example, resident directors sharing with their supervisor they feel overwhelmed with their workload and need help managing or need to take time off is an appropriate form of advocacy. A resident director who provides feedback for how work should be delegated among staff may be considered inappropriate advocacy.

When it comes to engaging resident directors in considering how they will take care of themselves and advocate for their needs, supervisors can pose the following questions as a reflection activity: What are ways you like to care for yourself mentally, physically, and socially? How do you know when you are feeling overwhelmed? Which dimension(s) of wellness is easier for you to prioritize in taking care of yourself in when stressed (e.g., mentally, physically, socially), and why? Which dimension(s) of wellness do you tend to put on the back burner when you feel stressed, and why? What is a goal you have as it relates to your well-being in the next year (consider the three dimensions of wellness: mental, physical, and social)? How will you know you are making progress towards achieving this goal? How will your supervisor know when you are overwhelmed? What is one way your supervisor can support you when you are feeling overwhelmed?

Resident directors should reflect on these questions and write out their responses to keep so they can refer to throughout the year. During one-on-ones and other conversations where resident directors express feeling a lack of control or exhaustion from the work, supervisors can encourage them to revisit their reflection activity responses to determine how they can regain control by taking care of themselves. Resident directors should revise their responses to the reflection prompts as appropriate, recognizing that their interests and needs will continue to evolve throughout young adulthood as they are continuing to develop as described by Arnett's (2000; 2007) emerging adulthood theory.

### **Recommendations for Future Research**

This research case study explored how three departments of residence life cultivated a culture of well-being for their live-in, professional staff. While there were many similarities across sites between directors and resident directors in their experiences, and even across levels

(e.g., director and resident director participants), the limited scope of this research study limits the application of its findings broadly. I have three recommendations for future research projects to further investigate how cultures of well-being for professional staff are being fostered and nurtured.

### **Purpose and Roles of Resident Directors in the Field**

My first recommendation is that future research should be conducted around the purpose and role of resident directors. As shared in implications for practice, there may be merit in having two types of resident directors within a department, one that is focused on care and concern, and the other position more focused on the original nature of the resident director position, which is to create community (Frederiksen, 1993). In order to determine this, research needs to be conducted on a large-scale level that examines the variation of resident director positions across the country by institutional type, size, organizational structure, and institutional student needs. This research could give insight into the practicality of restructuring the resident director position and provide concrete ideas of how different positions could complement one another within the same institution.

### **Examining Collaboration Across Silos on a College Campus**

Similarly, research also needs to be conducted on a large-scale level examining the inter-departmental operations and collaborative efforts within institutions. To some degree, all three sites had a divisional, and even institution-wide, commitment to creating a culture that supports staff as people first and cares for the well-being of all community members, including staff and faculty. However, through interviews it was apparent that while staff appreciated the value that was espoused on an institutional level, it was the chaos of working with other departments and managing their expectations of what the purpose of the resident director was, along with serving

on-call and responding to many repeating stressful situations, that contributed to exhaustion and overall burnout from the position. Recognizing that the pressure of external influences (e.g., changing needs of students, socio-political issues) informs the work operationalized within an institution, research should be done that explores how departments can better collaborate so that work can be accomplished in more efficient ways while still meeting needs of students and other stakeholders (Kezar & Lester, 2009).

### **Living in Residence Halls as a Staff of Color**

Finally, the limited number of participants who identified as persons of color warrants further research on how departments of residence life specifically create and support a culture of well-being for their staff of color. The three participants of color in this research case study all acknowledged that their identity influenced their experience within their institution to varying degrees. Research specific to full-time, live-in staff of color could explore discrimination and racism in the workplace through the lens of living where you work, along with navigating being a role model and source of support available to residential students of color. How do the overt and covert policies and work practices either foster or hinder staff of color's sense of belonging within the department? What are the experiences of staff of color who live in residence halls that are predominantly white? Research could also explore the impact of responding to crisis situations involving white students versus students of color and the self-impact of police involvement in campus crisis response as a staff of color.

### **Conclusion**

When I conceptualized this research study, I was not sure of what would emerge in data collection and analysis. Would interviews lean towards discussing toxic behaviors (e.g., toxic relationships, unhealthy coping mechanisms)? Would participants skate around the questions, not

wanting to share experiences that might paint them or colleagues in a bad light? Would participants struggle to answer the questions in general because of the sensitive nature that is sometimes associated with talking about one's well-being? The time that I conducted this research study also fell at an interesting time in the COVID pandemic where 'pandemic fatigue' was setting in and people were just generally exhausted from living in a pandemic. In addition, residence life professionals at many institutions were managing the housing and safety of students in alignment with COVID guidelines from the U.S. government. Given all of this, I was worried about the data I would collect from participants and if it would answer my research questions, which were formed pre-pandemic.

Instead, I learned that participants were eager to share their experiences and do so in vulnerable ways. Most participants reflected on their experiences pre-pandemic, and provided responses that encapsulated both pre-COVID experiences and COVID pandemic experiences. I was able to answer my guiding research question which was: How do residence life departments support a culture of well-being for their professional, live-in staff?

In answering this question, the supplemental questions listed below were also answered:

- What practices do departments currently implement to support the well-being of their professional, live-in staff?
- How do senior departmental leadership perceive the support they provide to promote a culture of well-being of professional, live-in staff members?
- How do professional, live-in staff perceive the support for their well-being from departmental leadership?

I do not know if I learned anything that those of us working in the field of residence life for at least five to ten years did not already anecdotally know. Specifically, what I found in

answering these questions was that departmental directors have a strong commitment to fostering a culture of well-being and also care for their live-in, professional staff. Directors, and the assistant director, achieved this work through forming relationships with staff and role modeling positive, healthy behaviors. For resident director participants, they strongly valued their relationships with their director and felt supported by their director as a person. For many of the resident director participants, it was the relationships they had with supervisors, as well as with students and peer colleagues that served as motivation for them to stay in their current positions. Time and time again, references were made to how kind colleagues were, how supervisors would go out of their way to support RDs, and how participants recognized the commitment of department leadership in promoting behaviors that supported well-being (e.g., going to the gym during the day, no email after hours).

However, despite the value in having good relationships with colleagues and finding much meaning in supporting student's development in a residential environment, there are many tension points which contribute to staff burning out of the position and the field. While participants acknowledged that the job is a lifestyle in that work happens after traditional business hours, the chaotic nature of the work is exhausting. A lack of understanding of the resident director role by other campus partners contributes to more, and sometimes unnecessary, work being added to the plates of RDs. Informing this change of expectations is the larger society. Changing student needs, changing socio-political climate (e.g., federal laws, Black Lives Matter), and other influences (e.g., COVID-19) have forced institutions to adapt and respond to these issues as they influence change within the campus environment with a disproportionate amount of the response falling onto live-in staff.

What was most notable in my conversations with each of the resident director participants was their passion for working with residential students. Each of them shared similar reasons for initially pursuing a resident director position in that they wanted to support students and create experiences that foster their leadership and overall developmental growth through college. They chose to participate in this research study because they cared about this topic, and they wanted to be a part of the change to create healthier work environments for residence life staff. They value the work they get to do, but recognize that the role of resident directors has become increasingly complex and is no longer a sustainable position. Not a single resident director participant talked about wanting to advance within residence life, but several explicitly mentioned that they were looking to leave the field despite all the parts of their job they enjoyed (e.g., working with students, having meaningful relationships with colleagues). Two of the department leaders I interviewed described their fatigue with the work, and in hearing their stories, the likelihood of them staying in residence life long term did not sound promising either. As Emma at Northeast shared in reflecting upon working in residence life during the past couple of years:

If this is not the reckoning, I don't know what else is. This has to be the tipping point where we start really talking about like, “What is important in the work that we do? How do we value our time? How do we value our employees?”

So as a field – a field in which human connection, care of others, and service is valued - what is our response to these questions?

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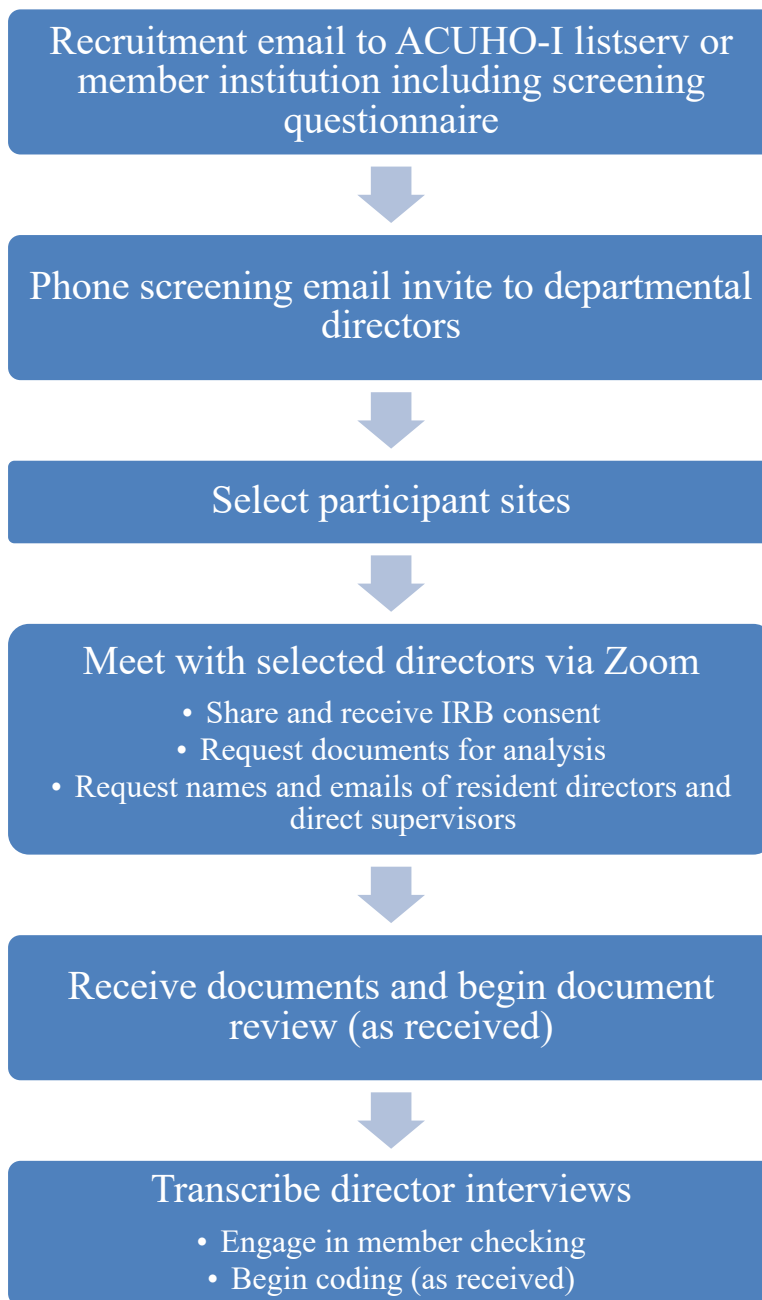
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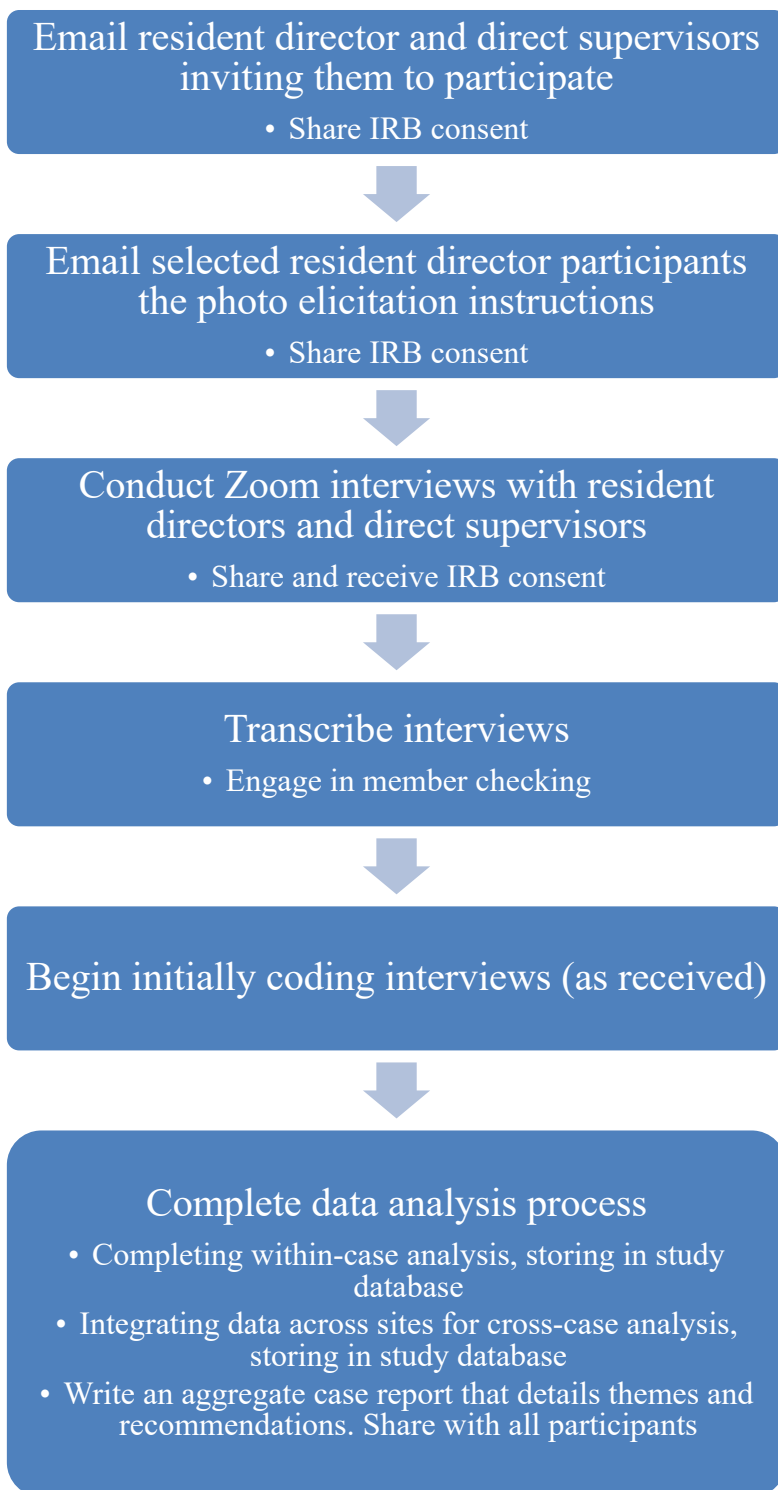
## Appendix A

## Planning Materials

## A.1 Flow Chart of Data Collection and Analysis



## A.1 Flow Chart of Data Collection and Analysis (continued)



## Appendix B

### Recruitment Materials

#### B.1 Recruitment Email

Dear colleague,

My name is Brittany McDaniel, and I'm a doctoral candidate at the University of Georgia beginning the data collection process for my IRB approved dissertation which explores how residence life departments support a culture of well-being for their live-in, full-time staff. Now more than ever, staff well-being is important as our field continues to provide essential support to students while also living through a public health pandemic. I am hoping to learn how departments can best support full-time, live-in staff so that these staff members can continue providing high-quality care and services to residential students. For this case study, I am seeking participants who:

- Work in a residence life department in the U.S. managing on-campus housing for undergraduate students
- Employ full-time, entry-level resident directors

Since campus visits aren't practical at this time due to COVID, I am conducting this case study remotely. For each site selected, I intend to:

- Conduct a 60-75 minute interview with the director of residence life.
- Collect documents that provide an understanding to well-being support of staff (e.g., organizational chart, policies, correspondence, initiatives).
- Engage in a picture taking activity (e.g., photo elicitation) with the director and resident director participants.
- Conduct individual interviews with 2-3 resident directors and 1-2 direct supervisors of resident directors. Each interview lasting between 60-75 minutes.

If you are interested in potentially participating in this research study, please complete this form [HYPERLINK FORM]. I will follow-up with email communication regarding next steps to those who complete the form. If you have questions about my study, you may contact me, Brittany McDaniel, at BLANK@uga.edu or at XXX-XXX-XXXX.

Kind regards,

Brittany McDaniel  
Ph.D. Candidate  
College Student Affairs Administration program at University of Georgia

## B.2 Phone Screening Email Invite

Dear <NAME>,

Thank you for your interest in my case study exploring how departments of residence life support a culture of well-being for their live-in, professional staff. I am interested in scheduling a brief phone call to explain what will be asked of you and some people who work in your department if you agree to participate in my research study. This phone call will also be an opportunity for you to ask any questions you have at this time.

If you are interested in proceeding, please provide 3-4 dates and times that work for you to chat, as well as the best number to reach you.

Kindly,

Brittany

### B.3 Recruitment Email to Snowballed Sites

Dear <Name>,

My name is Brittany McDaniel, and I'm a doctoral candidate at the University of Georgia beginning the data collection process for my IRB approved dissertation which explores how residence life departments support a culture of well-being for their live-in, full-time staff. Now more than ever, staff well-being is important as our field continues to provide essential support to students while also living through a public health pandemic. I am hoping to learn how departments can best support full-time, live-in staff so that these staff members can continue providing high-quality care and services to residential students. For this case study, I am seeking participants who:

- Work in a residence life department in the U.S. managing on-campus housing for undergraduate students
- Employ full-time, entry-level resident directors

Since campus visits aren't practical at this time due to COVID, I am conducting this case study remotely. For each site selected, I intend to:

- Conduct a 60-75 minute interview with the director of residence life.
- Collect documents that provide an understanding to well-being support of staff (e.g., organizational chart, policies, correspondence, initiatives).
- Engage in a picture taking activity (e.g., photo elicitation) with the director and resident director participants.
- Conduct individual interviews with 2-3 resident directors and 1-2 direct supervisors of resident directors. Each interview lasting between 60-75 minutes.

If you are interested in potentially participating in this research study, please complete this form [HYPERLINK FORM].

If you have questions, please don't hesitate to reply to this email.

Kind regards,

Brittany McDaniel  
BLANK@uga.edu

#### B.4 Initial Invitation Email to Schedule Phone Call

Hi <NAME>,

I hope your week is off to a good start! I'm checking in to see if you have a few minutes today or tomorrow to talk more about the staff well-being research study, and moving forward with using <BLANK> as a site for this research study?

Kindly,  
Brittany

## B.5 Phone Script to Invite Site to Formally Participate in Study

Hi <NAME>!

How are you?

Great news! I'm calling today to formally invite you to participate in my case study exploring how departments of residence life support a culture of well-being for their live-in, professional staff!

I really enjoyed our conversation the other week, and I believe that you and your department will have much to contribute to my research study. <insert any personal information shared during phone screening that may be applicable here>.

I realize you might need to connect with your supervisor regarding this, but are there any questions you have right now that I might be able to answer?

<Allow for Q&A>

In terms of timeline, I'm looking to conduct interviews throughout the month of February. I'll be sending an email once we wrap up that contains additional information about what I need from you at this time, but to summarize:

- Completing the doodle poll at your earliest convenience to schedule your interview
- Sending a list of names and work email addresses of your staff eligible to participate
- Beginning to curate a collection of documents to share with me that relate to staff well-being

Do you have any other questions at this time?

<Allow for Q&A>

Once again, I'm so excited to be working with you on this research study! If you have any questions or need anything at all, don't hesitate to text/call (XXX-XXX-XXXX) or email (BLANK@uga.edu)!

Have a great rest of your day!

## B.6 Email to Selected Sites

Dear <NAME>,

Thank you for your interest in participating in this case study exploring how departments of residence life support a culture of well-being for their live-in, professional staff. I am really looking forward to working with and learning from you. This study is approved by the Institutional Review Board (IRB) at the University of Georgia, and as such, I am attaching a consent form for you to review prior to our interview. Your participation in a recorded Zoom (video) interview is your verbal agreement to the terms outlined in the attached IRB consent form.

Please complete **this Doodle** <INSERT LINK> letting me know a date/time that works for you to participate in your interview. During our interview, I will ask you questions about how you support the well-being of your staff and how your department's structure supports staff well-being. I am attaching a one-page summary sheet to give you an understanding of my research and the topics we will be discussing in the interview.

I will ask you to share relevant documents that help me better understand how your department supports a culture of well-being for live-in, professional staff. We'll discuss what documents might be useful, and you will have time following the interview to get me these documents. Some examples of documents that you may choose to share include: mission, vision, goals of the department, staffing policies (e.g., time off, pet policy, communication), organizational chart, position descriptions, budget allocations that support staff personally or professionally, event outlines, applicable emails, and institutional HR documents outlining employee well-being support (e.g., leave policies, benefits).

**Prior to our interview, please share a list of full-time, live-in resident directors and their direct supervisors containing name and work email.** I will send them a formal invitation to participate in this research study. There is no recruitment you will need to conduct on your end.

Finally, I will be inviting resident director participants to participate in a photo elicitation (e.g. picture taking) activity. I am asking them to bring to their interview three pictures that capture their experience at <BLANK> institution as it connects to some part of their well-being.

The following prompts will be shared to help in determining what pictures to take:

- a. What/who helps me feel balanced on campus?
- b. My [fill in blank with social, mental, or physical health] is affected by \_\_\_\_\_.
  - i. (e.g., My social health is affected by \_\_\_\_\_).
- c. What/who contributes to me feeling burned out?

I invite you to also submit pictures of your campus environment to support in the analysis of this method. Pictures may be of different places across your campus including different residence halls, residence life office spaces, and other areas that are frequently used by live-in staff. You are welcome to bring these images to our interview. It is optional for you to share pictures. I wanted to provide this option since this will be a request asked of resident director participants.

Thank you again for your interest and willingness! Let me know if you have any questions.

Cheers,  
Brittany

## B.7 Follow-up Email to Sites Initially Expressed Interest

Dear <NAME>,

Thank you for your interest in my case study exploring how departments of residence life support a culture of well-being for their live-in, professional staff. I really enjoyed the opportunity to connect and learn more about you and your department. At this time, I will not be moving forward with <BLANK> institution as one of the sites in my research study. I appreciate your support and interest in this topic, and I hope we are able to continue to remain in touch. If you have any questions, don't hesitate to reach out!

Kindly,

Brittany

## B.8 Email to Departmental Staff

Greetings!

My name is Brittany McDaniel, and I'm a doctoral candidate at the University of Georgia beginning the data collection process for my IRB approved dissertation which explores how residence life departments support a culture of well-being for their live-in, full-time staff. I received your name from <BLANK> who has agreed for your department to serve as one of the sites in my research study. I asked <BLANK> to share the contact information of all full-time, live-in resident directors and their direct supervisors so I could see if you might be interested in participating in my research study?

Participation in this research study will consist of:

- Resident director participants taking pictures of places on campus, people, or things that captures some part of how your well-being is impacted
- Each participant participating in an interview lasting between 60-75 minutes.

I am attaching a consent form for you to review so you are informed of what participating in this research study entails. If you are interested in participating, please complete this form <LINK FORM>. You are under no obligation to participate.

If you have questions, please respond to this email.

Hope to have an opportunity to chat with you soon!

Brittany

----QUALTRICS FORM WILL INCLUDE----

- Confirmation they are employed in the department of one of the directors I interviewed
- Question about if they worked in their current department prior to COVID
- Confirmation they are under no obligation to participate
- Space to provide schedule availability

## B.9 Initial Email Inviting Participants to Sign Up for Interview & Photo Elicitation Instructions

Greetings!

Thank you for your interest in participating in my dissertation research study exploring how departments of residence life support a culture of well-being for their live-in, professional staff. I am really looking forward to working with and learning from you. This study is approved by the Institutional Review Board (IRB) at the University of Georgia, and as such, I am attaching a consent form for you to review prior to our interview. Your participation in a recorded Zoom (video) interview is your verbal agreement to the terms outlined in the attached IRB consent form.

If you are still interested in participating in this study, please complete this Doodle <INSERT LINK> letting me know a date/time that works for you to participate in your interview. I'm attaching a summary sheet which shares potential topics of conversation for our time together.

Prior to participating in your 60-75 minute individual interview via Zoom, I'm asking you to spend some time reflecting on how your well-being is and is not supported by individuals who work in your department and your department as an entity. Please bring to our interview three pictures that capture your experience at your current institution as it connects to some part of your well-being. Here are some prompts to help determine the pictures you take and share:

- What/who helps me feel balanced on campus?
- My [fill in blank with social, mental, or physical health] is affected by \_\_\_\_\_.
  - (My social health is affected by \_\_\_\_\_).
- What/who contributes to me feeling burned out?

We will spend time during our interview discussing your pictures. I will also collect your pictures to use as a part of my case study. One last note – if you take pictures that include people in them, please make sure to ask for and receive their consent to be in the photo.

Thank you again for your interest and willingness! If you have any questions, don't hesitate to reach out. I'm looking forward to chatting with you soon!

Kindly,  
Brittany

## B.10 Confirmation Email to Staff Participating in Interview

Hi <NAME>,

I'm really looking forward to our time together on DATE at TIME! Below is the Zoom link that we will use to chat.

<INSERT ZOOM LINK>

As a reminder of what is outlined in the informed consent (attached), I will be recording our conversation for transcription purposes. If you do not feel comfortable being recorded, please let me know as soon as possible. What you share in our conversation will be kept confidential and there will be no personal identifiers attached to what you share in the findings of my research case study.

We will spend about 60-75 minutes on DATE. I'll open up the conversation with a few formal items I need to review prior to us diving into the conversation. I'm also reattaching a summary sheet which shares potential topics of conversation for our time together. I recommend bring a glass of water or something else to drink because we will be talking a lot!

Don't hesitate to reach out with questions beforehand. You can email or text/call me at XXX-XXX-XXXX. See you DATE!

Brittany

### B.11 Follow-up Email to Individuals Initially Interested in Participating in Interview

Greetings!

Thank you so much for expressing interest in my research study. I'm writing to share an update of where I am in the process. At this time, I will not be interviewing any additional participants for my study. I appreciate your support and interest in this topic. If you have any questions, don't hesitate to reach out. Once again, thank you for your interest – it means a lot!

Be well,

Brittany

## Appendix C

## Informed Consent

## C.1 Informed Consent for Department Leaders

**UNIVERSITY OF GEORGIA  
CONSENT FORM****Exploring How Departments of Residence Life Support Live-In, Professional Staff Well-Being**

You are being asked to take part in a research study. The information in this form will help you decide if you want to be in the study. Please ask the researcher(s) below if there is anything that is not clear or if you need more information.

**Principal Researcher:** Brittany McDaniel  
Department of Counseling and Human Development Services

This study is being conducted under the supervision of Dr. Laura Dean, Department of Counseling and Human Development Services.

**Purpose:**

The purpose of this focus group is to explore how departments of residence life support a culture of well-being for their live-in, professional staff.

**Procedure:**

If you agree to participate, you will be asked to answer questions about your experiences as a director in supporting a culture of well-being for your live-in staff in an interview which will last between 60-75 minutes. You will also be asked to share relevant documents for analysis as it relates to the study including participating in a photo elicitation activity. You will be asked to share the contact information for full-time resident directors and direct supervisors of resident directors in your office. The researcher will contact these individuals inviting them to participate in the research study.

**Benefits and Risks:**

There are no direct benefits for participation on the research. Findings from this research will be used to educate and inform higher education administrators in how to support live-in, professional staff well-being by developing more supportive environments.

There are no known risks associated with this study. Please ask to skip any questions you do not feel willing or comfortable answering, and the researcher will not probe any further with that question.

**Zoom Recording:**

Each of the Zoom individual interviews will be recorded so that the interview may be transcribed afterwards. Recordings will be kept in a locked file on the researcher's computer. After transcription, recordings will be deleted. By agreeing to continue being present in the Zoom room once the researcher starts the recording button you indicate that you agree to having the session recorded.

**Taking part is voluntary:**

Your involvement in the study is voluntary, and you may choose to not participate or to stop at any time without penalty. If you decide to withdraw from the study, the information/data collected from you or about you up to the point of your withdrawal will be kept as part of the study and may continue to be analyzed as part of the study.

**Confidentiality:**

Collected information will be kept confidential. Participants will choose a pseudonym to protect their identity. The researcher will choose the pseudonym for each site. All people and institutions will be replaced by pseudonyms in the final written report of the study. Direct quotes may be used in the final written report of the study using the pseudonym chosen by the participant. Otherwise, researchers will not release identifiable results of the study to anyone other than the individuals working on the research project without your written consent unless required by law.

**If you have questions:**

*Brittany McDaniel* is the doctoral candidate conducting the study. The supervising professor, *Dr. Laura Dean* at the University of Georgia, will be serving as primary investigator for the study. If you have questions, you may ask now or contact *Brittany McDaniel* at [BLANK@uga.edu](mailto:BLANK@uga.edu) . If you have any questions or concerns regarding your rights as a research participant in this study, you may contact the Institutional Review Board (IRB) Chairperson at 706.542.3199 or [irb@uga.edu](mailto:irb@uga.edu).

**By participating in the interview, you are agreeing for your department to be one of the sites in this research case study.**

## C.2 Informed Consent for Supervisor Participants

**UNIVERSITY OF GEORGIA  
CONSENT FORM****Exploring How Departments of Residence Life Support Live-In, Professional Staff Well-Being**

You are being asked to take part in a research study. The information in this form will help you decide if you want to be in the study. Please ask the researcher(s) below if there is anything that is not clear or if you need more information.

**Principal Researcher:** Brittany McDaniel  
Department of Counseling and Human Development Services

This study is being conducted under the supervision of Dr. Laura Dean, Department of Counseling and Human Development Services.

**Purpose:**

The purpose of this focus group is to explore how departments of residence life support a culture of well-being for their live-in, professional staff.

**Procedure:**

If you agree to participate, you will be asked to answer questions about your experiences in supporting the well-being of the full-time, live-in resident directors you supervise at your current institution.

**Benefits and Risks:**

There are no direct benefits for participation on the research. Findings from this research will be used to educate and inform higher education administrators in how to support live-in, professional staff well-being by developing more supportive environments.

There are no known risks associated with this study. Please ask to skip any questions you do not feel willing or comfortable answering, and the researcher will not probe any further with that question.

**Zoom Recording:**

Each of the Zoom individual interviews will be recorded so that the interview may be transcribed afterwards. Recordings will be kept in a locked file on the researcher's computer. After transcription, recordings will be deleted. By agreeing to continue being present in the Zoom room once the researcher starts the recording button you indicate that you agree to having the session recorded.

**Taking part is voluntary:**

Your involvement in the study is voluntary, and you may choose to not participate or to stop at any time without penalty. If you decide to withdraw from the study, the information/data

collected from you or about you up to the point of your withdrawal will be kept as part of the study and may continue to be analyzed as part of the study.

**Confidentiality:**

Collected information will be kept confidential. Participants will choose a pseudonym to protect their identity. The researcher will choose the pseudonym for each site. All people and institutions will be replaced by pseudonyms in the final written report of the study. Direct quotes may be used in the final written report of the study using the pseudonym chosen by the participant. Otherwise, researchers will not release identifiable results of the study to anyone other than the individuals working on the research project without your written consent unless required by law.

**If you have questions:**

*Brittany McDaniel* is the doctoral candidate conducting the study. The supervising professor, *Dr. Laura Dean* at the University of Georgia, will be serving as primary investigator for the study. If you have questions, you may ask now or contact *Brittany McDaniel* at [BLANK@uga.edu](mailto:BLANK@uga.edu) . If you have any questions or concerns regarding your rights as a research participant in this study, you may contact the Institutional Review Board (IRB) Chairperson at 706.542.3199 or [irb@uga.edu](mailto:irb@uga.edu).

**By participating in the interview, you are agreeing to be a participant in this research case study.**

## C.3 Informed Consent for Resident Director Participants

**UNIVERSITY OF GEORGIA  
CONSENT FORM****Exploring How Departments of Residence Life Support Live-In, Professional Staff Well-Being**

You are being asked to take part in a research study. The information in this form will help you decide if you want to be in the study. Please ask the researcher(s) below if there is anything that is not clear or if you need more information.

**Principal Researcher:** Brittany McDaniel  
Department of Counseling and Human Development Services

This study is being conducted under the supervision of Dr. Laura Dean, Department of Counseling and Human Development Services.

**Purpose:**

The purpose of this focus group is to explore how departments of residence life support a culture of well-being for their live-in, professional staff.

**Procedure:**

If you agree to participate, you will engage in a photo elicitation activity prior to participating in an individual interview. Your individual interview will last between 60-75 minutes, and you will be asked to answer questions about your experiences as a live-in staff member at your current institution.

**Benefits and Risks:**

There are no direct benefits for participation on the research. Findings from this research will be used to educate and inform higher education administrators in how to support live-in, professional staff well-being by developing more supportive environments.

There are no known risks associated with this study. Please ask to skip any questions you do not feel willing or comfortable answering, and the researcher will not probe any further with that question.

**Zoom Recording:**

Each of the Zoom individual interviews will be recorded so that the interview may be transcribed afterwards. Recordings will be kept in a locked file on the researcher's computer. After transcription, recordings will be deleted. By agreeing to continue being present in the Zoom room once the researcher starts the recording button you indicate that you agree to having the session recorded.

**Taking part is voluntary:**

Your involvement in the study is voluntary, and you may choose to not participate or to stop at any time without penalty. If you decide to withdraw from the study, the information/data collected from you or about you up to the point of your withdrawal will be kept as part of the study and may continue to be analyzed as part of the study.

**Confidentiality:**

Collected information will be kept confidential. Participants will choose a pseudonym to protect their identity. The researcher will choose the pseudonym for each site. All people and institutions will be replaced by pseudonyms in the final written report of the study. Direct quotes may be used in the final written report of the study using the pseudonym chosen by the participant. Otherwise, researchers will not release identifiable results of the study to anyone other than the individuals working on the research project without your written consent unless required by law.

**If you have questions:**

*Brittany McDaniel* is the doctoral candidate conducting the study. The supervising professor, *Dr. Laura Dean* at the University of Georgia, will be serving as primary investigator for the study. If you have questions, you may ask now or contact *Brittany McDaniel* at *BLANK@uga.edu*. If you have any questions or concerns regarding your rights as a research participant in this study, you may contact the Institutional Review Board (IRB) Chairperson at 706.542.3199 or *irb@uga.edu*.

**By participating in the interview, you are agreeing to be a participant in this research case study.**

## Appendix D

### General Communication

#### D.1 Follow-Up Email to Department Leaders

Dear <NAME>,

Thank you for taking the time to meet with me on <DATE>. I really enjoyed our conversation and learning more about <BLANK> and the department you lead. Given the time we're in, staff well-being can be a more delicate topic than in other times, and I appreciate your transparency in talking about well-being support for staff in your department.

As mentioned in our conversation, I'm following up to provide next steps as I move forward with my case study.

- 2) Can you send me documents that you believe will be beneficial to me in this case study? Examples of documents include: mission, vision, goals of the department, staffing policies, organizational chart, position descriptions, budget allocations that support staff personally or professionally, event outlines, applicable emails, and institutional HR documents outlining employee well-being support.
- 3) [**If not already shared**] Finally, can you also send me a list containing name, position title, and email for all full-time resident directors and their direct supervisors in your department?

Let me know if you have questions. I'd appreciate receiving these items by <DATE>. Looking forward to hearing from you soon!

Kindly,

Brittany

## D.2 Email to Participants Sharing Case Report

Dear <NAME>,

Thank you so much for participating in my research study. I really enjoyed our conversation and learned so much from what you shared with me. I selected three departments to participate in my case study, and spoke with twelve individuals. Each one of you shared a unique perspective, and there were many similarities and some differences across all people I spoke to as a part of this case study.

I realize that you are probably interested in knowing the outcome of this study – what are experiences or perspectives you share with others? How do your experiences or perspectives differ? What are recommendations for how departments of residence life can support well-being?

I've shared all of this information in the attached report. This report is an aggregate summary of all sites that participated in my research study. As a reminder, you chose your pseudonym, and I selected the pseudonym for each institution; these will not be shared with anyone involved with this research study.

Should you have questions or want to chat more, don't hesitate to reach out! Looking forward to crossing paths again in the future.

Be well,

Brittany  
mobile: (XXX)XXX-XXXX

### D.3 Aggregate Summary of Site Analysis

#### **Aggregate Site Summary**

##### ***The RD is (Not) Well:***

##### ***A Multi-Site Case Study Exploring Residence Life Live-In Staff Well-Being***

Dissertation by Brittany McDaniel, Ph.D.

This research case study explored how three departments of residence life support a culture of well-being for their professional, live-in staff. Specifically, I explored the external and internal factors, practices, and values that inform how a culture of well-being is fostered for live-in staff working in residence life. Working in constant high-stress situations where you also live can take a toll on one's well-being. In order to care for others, one must first take care of themselves. Staff must be able to take care of themselves to be most effective in supporting and helping their students develop holistically. If staff, in this case resident directors, cannot maintain wellness, then the work they do with students may suffer and can also contribute to feelings of burnout (Burke et al., 2016). As a result of these characteristics and realities, it is important that departments support the well-being of their staff. The research question that guided this study was: How do residence life departments support a culture of well-being for their professional, live-in staff?

To examine how this culture is fostered, I asked questions to understand the practices departments implement to support well-being, how senior leadership perceives the support they provide to live-in staff, and how live-in staff perceive the support they receive from senior leadership. I learned through this study that there is intentional effort demonstrated by senior, and mid-level, department leadership to foster a culture of well-being for professional, live-in staff. This culture is fostered through the formation of personal-professional relationships and

demonstrating positive role modeling behaviors such as incorporating management of personal needs into the business day and limiting email after hours. Additionally, benefits such as comp time, implementation of pet policies, and other fringe benefits to compensate for low salary are also appreciated by staff and support well-being, although a higher salary is always appreciated given the work required of resident director staff. Resident director staff overall both acknowledged and appreciated the emphasis on relationship building, level of support they received from supervisors, and certain staff policies and benefits, thus supporting existing research that demonstrates the value in these practices in promoting a culture of well-being for staff (Chessman, 2021; Preston et al., 2021). Additional themes that emerged, described briefly in this summary, include:

- the impact of increasing responsibilities on staff well-being, and
- frustrations with the lack of understanding of what it means to be a resident director.

Recommendations to support staff well-being described near the end of the summary include:

- diversifying the types of resident director positions on campus,
- considering recruitment practices, and
- emphasizing relationship building as people first, employee second.

This aggregate summary contains description of sites and individual participants followed by selected findings from the cross-case analysis and implications for practice. More detailed findings, including within-case analysis of each site, discussion of findings, and comprehensive recommendations for practice can be found in the dissertation titled: *The RD is (Not) Well: A Multi-Site Case Study Exploring Residence Life Live-In Staff Well-Being* (University of Georgia, 2021).

## **Description of Sites**

Three sites participated in this research study. Two sites were four-year public institutions, and one site was a four-year private institution. The two public institutions, Northeast University and Southeast University, housed between 5,001-7,500 students. New England University, the four-year private institution, housed between 1,001-2,500 students. At each site, I interviewed a senior-level staff member (e.g., director) and two to three resident directors. At Southeast, I also interviewed a mid-level manager. I selected the pseudonyms for each site to implement an extra level of protection, but each participant selected their pseudonyms.

## **Selected Findings from Cross-Case Analysis**

In this multi-site research case study, I analyzed data both within each individual site and across all sites. Individual site analysis is located within my dissertation. Context for how the data was analyzed is shared within the dissertation, including how I applied Manning's (2017) bureaucratic, organized anarchy, and spiritual organizational frames, which served as the guiding framework for the creation of my research study and how I conducted the analysis. What is shared within this section is the broad themes across all sites; further discussion of what the themes mean in relation to existing literature is also in my dissertation.

## **“System Makes It Impossible...To Do What's Right”**

In present times, the work of resident directors is significantly different in some ways than the work of resident directors at the turn of the twenty-first century. All three site directors and Southeast's mid-level manager all reflected on their experiences of when they first started in the field as live-in resident directors and acknowledged the ways that the position has changed due to the rising number of students entering college with mental health issues, increasing

administrative responsibilities, the demand to do more with less financial resources, and societal forces (e.g., COVID), which also influenced the way work is operationalized in residence life. These changes have influenced the bureaucratic ways higher education institutions operate in that most of the student-facing work falls on the shoulders of resident directors. This is in alignment with how Manning (2017) describes the functioning of bureaucratic organizations in that each member of an organization has a role, and in a hierarchical organization employees are delegated tasks from management.

Consistent throughout the interviews was the recognition that the demand on staff supporting students in distress takes a toll on staff's own well-being and satisfaction in the role. Staff at each site talked about their institution's emphasis on implementing a robust crisis protocol that provides comprehensive support to students in crisis and post-crisis. Steve, at Southeast, shared that the protocol employed at Southeast has been adapted by other institutions because of its level of detail to how to manage varying incidents, from supporting the student(s) in distress and the students indirectly impacted, to communication templates and other follow-up measures. Northeast also employed a protocol that required staff to provide high-level care and support to students in/post-crisis. One resident director at Northeast described that comparatively unique to Northeast is the decision to have entry-level staff in non-residence life offices live on-campus and serve in the on-call rotation. However, in his time at Northeast "all of those positions [have] become vacant as a result of the on-call process," thus often leaving the on-call team short-staffed and placing more burden on the resident directors to respond and support students in distress after-hours on top of their "day job." A resident director at Southeast, shared, the demands of the on-call and other aspects of the role resident directors feel challenged by are not isolated to just Southeast; rather the problems exist at the larger level of the profession.

Aside from the demands of constantly supporting students in crisis, the customer-service nature of our profession also contributed to the increasing pressure placed on resident directors, and other staff, to cater to the student experience. Josh, a resident director, spoke about the “pressure on making the residential experience be worth it for our students, aka our customers,” so they choose to live on campus versus paying to live in a nice complex off campus. Emma, one of the three directors interviewed, talked about how our customers (i.e., students) are “increasing their expectations,” and our profession is caving to it, sometimes at the cost of not supporting the well-being of staff. She continually found herself “wanting to do what I know to be right, or wanting to advocate what I know to be the best practice, or just frankly the kind, compassionate thing to do, and the system itself makes it impossible.” Emma realized that her resident directors are exhausted, and so was she, yet she was at a loss for how to create a better work environment that is able to support staff well-being while also meeting the needs of students.

### **Talk a Good Game but “Absolutely Suck at It Ourselves”**

Indirectly shared by many participants, both at the resident director and director level, was the idea that today’s resident director staff must be all things to all people within the institution. According to Manning (2017), this idea can be contributed to fluid participation occurring within an institution, and competing priorities can make it seem the work never ends as there is always a project to accomplish. Josh, a resident director, shared that he chose to do work when away on vacation because:

It's harder for me to transition all my cases to someone else and explain to them where they're at and then pick them back up. I'm just going to do it. And that's been my perspective the whole time. It's easier for me to work when I'm on vacation or out of the office than try to get someone to cover this stuff. But that's so unhealthy.

Josh recognized that this is unhealthy, but he felt like if he's "not at work, there is no one who is stepping in to cover my stuff." Specifically, he stated:

I supervise a million people. I do all this case management. I do all these conduct processes. I'm doing RA selection. If I just truly left for a week and didn't look at my email, number one, I think people would be frustrated they hadn't gotten a response.

Number two, it would be so punishing when I finally did look at it that it wouldn't have been worth being away.

Aside from feeling like the workload is insurmountable, resident director participants also felt that they were the 'catch-all' employees for the institution. As Magnolia, another resident director, shared, the "biggest struggle of an on-call professional is the misunderstanding of our role." He cited examples of how staff in other offices assumed that since he and his colleagues lived on and responded to calls after hours, that meant they were able to delegate work to these staff members. Clare, a resident director, provided examples of being asked to do cooking demonstrations and work the mail rooms since she lives on campus. Two of the directors discussed how over time we have normalized the notion that it is expected that we do "10,000 things" and still thrive as people. As one of the directors said, "We've taught our student leaders that this is normal and this is just what you do. I think [teaching what is healthy and appropriate] starts in our work with students because those are the people that become RDs."

### **“Putting Value in the Things That [Staff] Value”**

Despite frustrations and tensions with specific responsibilities, salary, and cultural elements of an institution, it was evident in the interviews that a driving factor in staff's experiences and satisfaction with their work resulted from being able to cultivate and maintain positive relationships with colleagues, both in and outside work settings. Additionally, observing

how to role model healthy behaviors in the workplace and achieve work-life integration were two lessons resident directors learned and valued. Across all sites, the efforts to create healthy work environments, cultivate meaningful collegial relationships, and promote the idea of “person first, employee second” all were tangible examples of the spiritual frame’s characteristics as described by Manning (2017).

John, a resident director, who described many frustrating experiences in his current position, also shared that what keeps him in his current role is his love for the institution, which is intimately connected to the people who “are really kind” at the institution and show an investment in him as a person. John talked about how a majority of the resident directors have a very positive relationship with their director, and that she “has done a lot to help” John, both professionally and as a new father.

Another resident director, spoke of the strong bond they had with their colleagues in that “it feels like kind of like a family. I joke that I'm not friends with all of them, but that's not really the real reality.” Magnolia talked about how his colleagues view his wife as a pseudo-resident director, since she helps out when needed. He shared how he feels so grateful because “my wife has developed a really good relationship with [other resident directors].”

On a supervisory and leadership level, individuals interviewed acknowledged the importance and value of getting to know staff as people first and encouraging them to live their lives outside of the position. As a direct supervisor of resident directors, Steve described a conversation he had this year encouraging a staff member to take care of themselves:

Even yesterday I had a staff member that has a partner that lives in California. It's like, "Hey, I've been down. I haven't seen my partner in a while." I was like, "You know, COVID cases are kind of down. If you feel like you want to take that risk, there's direct

flights to California to LAX, and the flights aren't too bad right now. I have a friend that just came back. She went there and back. She was in a row by herself on both flights." She's like, "Really?" I said, "Yeah. Do me a favor. Go look in on an airline and tell me what you find, and let me know." I can't tell her to book that flight, but at least tell me that she did look into researching the flight and how much. And if she wants to take the opportunity to take it, great.

Steve recognized that he cannot force a staff member to take care of themselves, but what he can do is provide space to have these conversations and plant seeds around how it is okay to prioritize yourself over the job. As leaders within the department, there was a general understanding that what matters to resident directors matters to senior leadership. Emma, a director, said she encouraged staff to pursue their passions and be intentional in cultivating personal relationships. It is important to her in “putting value in the things that [resident directors] value.” All directors expressed the importance of this idea, and resident director participants acknowledged they felt much support from their departmental leaders. It was apparent that having strong, positive relationships, when there was an investment in knowing someone outside of the role, helped to foster a workplace culture where staff felt invested and cared for, ultimately supporting their well-being.

### **Implications for Practice**

Based on the tension points collectively experienced by resident director participants, some of which were also acknowledged by senior leadership and reflected in literature, my recommendations for practice consider changes to the position to better support the well-being of professional, live-in staff. I will share implications for practice as it connects to departmental staffing practices and recommendations for cultivating a culture of well-being on a live-in staff

level. More comprehensive implications for practice, at an institutional, divisional, and departmental level, are described in my dissertation.

### ***Diversify Types of Resident Director Positions***

Departmental leadership within residence life should reexamine the purpose of the resident director role in the 21<sup>st</sup> century on their campus. Departmental directors, and even Steve, the assistant director interviewed, all practice positive behaviors and approaches that help to cultivate a culture of well-being that is in line with recent research published (Chessman, 2021; Preston et al., 2021). All resident director participants, and even some of the other staff members interviewed, shared that they entered the field of residence life because it provided them an opportunity to work with students in meaningful ways. What drains the well-being of many of the resident director participants is the extensive responsibilities attached to what it means to be an on-call professional. While they recognize the importance of supporting students in distress, the institutional expectation of high-level, high-touch not only negatively impacts their well-being but also limits the time they have to create a flourishing community within their residence hall (Collins & Hirt, 2006; Fredericksen, 1993).

As such, department leaders should consider diversifying the types of resident director positions that exist within their department. While a full-time, live-in staff member could still be assigned as the contact for a specific residential community for needs that arise during the business day, there could be a cluster of resident directors within the department focused on student staff development and community development, whereas other resident directors specifically focus on managing more of the high-level care needs residential students have. In essence, these latter resident directors would be pseudo-case managers; thus, departments should

also consider the educational backgrounds and practical experiences they are seeking in candidates for vacant positions.

### ***Reconsider Recruitment Practices***

Regardless of whether multiple, differentiated resident director positions are formed, hiring managers should (re)consider how position descriptions are worded, vacancies advertised, and interviews are conducted for candidates applying to the resident director position at their institution. As learned through interviews for this research study, participants entered the profession because they had an interest in supporting student development outside of the classroom through building a holistic and welcoming community within their residence hall (Astin, 1999; Fredericksen, 1993). In a cursory look at entry-level, resident director positions on *higheredjobs.com* (2021), many still list primary responsibilities of the position to include staff supervision, community development, administrative responsibilities, and crisis response. While resident directors, even those interviewed, still find they are expected to perform all of these responsibilities, there is a sentiment that there is more emphasis placed on on-going crisis response and “other duties as assigned.” Current resident directors should be consulted about the areas of responsibility that need to be considered and communicated, and interviews should be intentionally structured to ensure opportunities to evaluate candidate competence in those areas.

### ***People First, Employee Second***

The value in cultivating and maintaining strong relationships with colleagues at various levels was a salient theme across all of my interviews. Participants described how their relationships with colleagues gave them meaning and satisfaction in their current experiences. Department leaders should emphasize relationship building among all levels of staff, creating ongoing opportunities that allow for staff bonding. Direct supervisors and other department

leaders should take time in getting to know who their resident director staff are as individuals and encourage, or even facilitate, opportunities for staff members at the same level to form relationships outside of doing traditional work (e.g., participating in trivia nights). In creating these relationships within a power-differential, department leaders should also share about themselves with resident director staff, so they can better get to know them as a person and not just their leader. Department leaders should also role model healthy behaviors in the workplace (e.g., taking time to go to the gym, tending to personal needs). Leaders should also work with staff to develop healthy behaviors (e.g., not joining virtual meetings when out of the office, limiting email responses after business hours).

**Resident Director Accountability.** Additionally, resident director staff should work to form a culture where they encourage their peers to practice healthy behaviors and hold them accountable by calling them out when they work after hours or take on a project they might not be able to manage because of their existing workload. Resident directors should also engage with their supervisors in conversations around what they need from the department to help them take better care of themselves.

### **Conclusion**

This aggregate summary provided an overview of the factors which influenced the conceptualization of this research study and the research questions which guided this study. Description of sites was provided, along with broad themes across all cases and a couple of implications for practice. This multi-site research case study yielded rich data due to the depth and vulnerability participants were willing to share during their individual interviews. What is described in this summary gives only a sliver of insight as to how departments of residence cultivate a culture of well-being for their live-in, professional staff. Resident director staff tend to

be “catch-all employees” of their institution who have a wide array of responsibilities; however, what keeps staff invested in their work are the relationships they cultivate with their colleagues and supervisor(s) and their commitment to working with students. These latter two factors do not significantly diminish the effects of feeling exhausted and burned out from managing a varied workload. It is time for our profession to more thoughtfully consider how to reconceptualize the roles of resident directors in the 21<sup>st</sup> century to best meet student needs while supporting the well-being needs of staff.

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## Appendix E

### Interview Preparation Materials

#### E.1 Department Leader Summary Sheet

### **A Case Study Exploring How Departments of Residence Life Support Live-In Staff Well-Being**

#### **Purpose**

I am providing this one-page overview to give you an understanding of my research and the topics we will be discussing in the interview.

#### **Preparation**

My intent in providing this is that you are able to come to our time together prepared with examples, ideas, practices, and topics related to what is shared below.

#### **Research Study Overview**

The resident director position is a unique role given that it is often a stipulation that these individuals live where they work, and along with this comes the understanding that multiple environments (e.g., work, home) intersect and influence the holistic well-being of individuals operating within. There are also other factors that make individuals in the resident director position an interesting population to research. First and foremost, the resident director position is seen as a common entry point for many young student affairs professionals; yet, the position's demands have arguably become more stressful in the 21<sup>st</sup> century. While many if not all resident directors view their work of supporting students as being developmental in nature (Jones, & Stewart, 2016), they also frequently support students in distress and manage other critical issues associated with the student experience (Nguyen et al., 2018).

Working in constant high-stress situations where you also live can take a toll on one's well-being. In order to care for others, one must first take care of themselves. Staff must be able to take care of themselves to be most effective in supporting and helping their students develop holistically. If staff, in this case resident directors, cannot maintain wellness, then the work they do with students may suffer and can also lead them to feeling burned out (Burke et al., 2016). Resident directors may find it hard to maintain consistent holistic well-being on their own given that many individuals in this position have a small age and developmental difference between them and the students they work with (Arnett, 2000).

As a result of these characteristics and realities, it is important that departments support the well-being of their staff. Departments use various practices to support staff well-being, and this research study explores what external and internal factors, practices, and values inform how a culture of well-being is fostered for live-in staff working in residence life.

### Potential Interview Topics

- How do departmental/institutional values inform your work?
- What external support/barriers exist that make your work easier/harder?
- What is the departmental culture like (e.g., what brings joy and what depletes staff)?
- Well-being consists of mental, social, and physical dimensions. What was staff's well-being like prior to COVID?
- What components of staff well-being do you prioritize in your role?
- How do generational differences between you and your average entry-level professional influence how you work with them?

### References

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- Burke, M. G., Sauerheber, J. D., Hughey, A. W., & Laves, K. (2016). *Helping skills for working with college students: Applying counseling theory to student affairs practice*. New York NY: Routledge.
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## E.2 Supervisor Summary Sheet

### **A Case Study Exploring How Departments of Residence Life Support Live-In Staff Well-Being**

#### **Purpose**

I am providing this one-page overview to give you an understanding of my research and the topics we will be discussing in the interview.

#### **Preparation**

My intent in providing this is that you are able to come to our time together prepared with examples, ideas, practices, and topics related to what is shared below.

#### **Research Study Overview**

The resident director position is a unique role given that it is often a stipulation that these individuals live where they work, and along with this comes the understanding that multiple environments (e.g., work, home) intersect and influence the holistic well-being of individuals operating within. There are also other factors that make individuals in the resident director position an interesting population to research. First and foremost, the resident director position is seen as a common entry point for many young student affairs professionals; yet, the position's demands have arguably become more stressful in the 21<sup>st</sup> century. While many if not all resident directors view their work of supporting students as being developmental in nature (Jones, & Stewart, 2016), they also frequently support students in distress and manage other critical issues associated with the student experience (Nguyen et al., 2018).

Working in constant high-stress situations where you also live can take a toll on one's well-being. In order to care for others, one must first take care of themselves. Staff must be able to take care of themselves to be most effective in supporting and helping their students develop holistically. If staff, in this case resident directors, cannot maintain wellness, then the work they do with students may suffer and can also lead them to feeling burned out (Burke et al., 2016). Resident directors may find it hard to maintain consistent holistic well-being on their own given that many individuals in this position have a small age and developmental difference between them and the students they work with (Arnett, 2000).

As a result of these characteristics and realities, it is important that departments support the well-being of their staff. Departments use various practices to support staff well-being, and this research study explores what external and internal factors, practices, and values inform how a culture of well-being is fostered for live-in staff working in residence life.

#### **Potential Interview Topics**

- What are parts of your work that bring you joy and parts that bring you distress (as it influences your/staff's well-being)?
- What are well-being practices your institution/department implements to support well-being?
- Well-being consists of mental, social, and physical dimensions. How is well-being supported in your department? What is your role in cultivating a culture of well-being for staff? How does your well-being influence your ability to support your staff?
- How has staff well-being and support shifted from pre-pandemic to now?

→ How does the age of your average entry-level professional influence how you work with them?

### References

- Arnett, J. J. (2000). Emerging adulthood: A theory of development from the late teens through the twenties. *American Psychologist*, 55(5), 469-480.
- Burke, M. G., Sauerheber, J. D., Hughey, A. W., & Laves, K. (2016). *Helping skills for working with college students: Applying counseling theory to student affairs practice*. New York NY: Routledge.
- Jones, S. R. & Stewart, D. (2016). Evolution of student development theory. In Abes, E. S. (Ed.). *Critical perspectives on student development theory* (pp. 17-28). New Directions for Student Development Theory, no. 154. San Francisco, CA: Jossey-Bass.
- Nguyen, D. H., Collier, J., Watts, A., Cartwright, C., & King-Kostelac, A. (2018). Examining the legal consciousness of residence life staff. *Journal of College and University Student Housing*, 44(3), 126-143.

### E.3 Resident Director Summary Sheet

## **A Case Study Exploring How Departments of Residence Life Support Live-In Staff Well-Being**

### **Purpose**

I am providing this one-page overview to give you an understanding of my research and the topics we will be discussing in the interview.

### **Preparation**

My intent in providing this is that you are able to come to our time together prepared with examples, ideas, practices, and topics related to what is shared below.

### **Research Study Overview**

The resident director position is a unique role given that it is often a stipulation that these individuals live where they work, and along with this comes the understanding that multiple environments (e.g., work, home) intersect and influence the holistic well-being of individuals operating within. There are also other factors that make individuals in the resident director position an interesting population to research. First and foremost, the resident director position is seen as a common entry point for many young student affairs professionals; yet, the position's demands have arguably become more stressful in the 21<sup>st</sup> century. While many if not all resident directors view their work of supporting students as being developmental in nature (Jones, & Stewart, 2016), they also frequently support students in distress and manage other critical issues associated with the student experience (Nguyen et al., 2018). Working in constant high-stress situations where you also live can take a toll on one's well-being. In order to care for others, one must first take care of themselves. Staff must be able to take care of themselves to be most effective in supporting and helping their students develop holistically. If staff, in this case resident directors, cannot maintain wellness, then the work they do with students may suffer and can also lead them to feeling burned out (Burke et al., 2016).

As a result of these characteristics and realities, it is important that departments support the well-being of their staff. Departments use various practices to support staff well-being, and this research study explores what external and internal factors, practices, and values inform how a culture of well-being is fostered for live-in staff working in residence life.

### **Potential Interview Topics**

- What are parts of your work that bring you joy and parts that bring you distress (as it influences your well-being)?
- How do departmental/institutional values inform your work?
- Well-being consists of mental, social, and physical dimensions. How is well-being supported in your department? How do you take care of yourself as a result of living where you work?
- What is your role in creating a culture of well-being at work?
- How has COVID and other external environmental influences impacted how you take care of yourself as a housing professional?
- How do you describe the culture of your department to external individuals?

**References**

- Burke, M. G., Sauerheber, J. D., Hughey, A. W., & Laves, K. (2016). *Helping skills for working with college students: Applying counseling theory to student affairs practice*. New York NY: Routledge.
- Jones, S. R. & Stewart, D. (2016). Evolution of student development theory. In Abes, E. S. (Ed.). *Critical perspectives on student development theory* (pp. 17-28). New Directions for Student Development Theory, no. 154. San Francisco, CA: Jossey-Bass.
- Nguyen, D. H., Collier, J., Watts, A., Cartwright, C., & King-Kostelac, A. (2018). Examining the legal consciousness of residence life staff. *Journal of College and University Student Housing*, 44(3), 126-143.

## Appendix F

### Data Collection Instruments

#### F.1 Initial Screening Questionnaire

Thank you for your interest in participating in this case study exploring how departments of residence life support a culture of well-being for their live-in, professional staff. Please complete the following questionnaire to help me assess possible sites for this study. All information collected will be kept confidential. If you have questions, please contact Brittany McDaniel via email (BLANK@uga.edu) or mobile (XXX-XXX-XXXX).

Institution Name: {open-ended}

Geographic location in the U.S.:

New England (CT, MA, ME, NH, RI, VT)

Northeast (DE, MD, NJ, NY, PA)

Southeast (AL, AR, FL, GA, KY, LA, MS, NC, SC, TN, VA, WV)

Southwest (AZ, NM, OK, TX)

Great Lakes (IL, IN, MI, MN, OH, WI)

Plains (IA, KA, MO, ND, NE, SD)

Rocky Mountains (CO, ID, MT, NV, UT, WY)

West (AK, CA, HI, OR, WA)

Institution type:

4-Year Public (not-for-profit)

4-Year Private (not-for-profit)

2-Year Public (not-for-profit)

2-Year Private (not-for-profit)

Other (fill in)

On-campus bed count:

1000 or less

1001-2500

2501-5000

5001-7500

7501-1000

10001 or more

Number of live-in, full-time resident directors:

0

1-5

6-10  
 11-15  
 16 or more

Number of live-in, full-time resident directors who hold a master's degree:

0  
 1-5  
 6-10  
 11-15  
 16 or more

{Display only if previous number other than 0 selected} Are your live-in, full-time resident directors currently:

Furloughed  
 Working remotely  
 Working in the office  
 Hybrid work approach  
 Other {fill in blank}

Number of other live-in, full-time staff:

0  
 1-5  
 6-10  
 11 or more

{Display only if previous number other than 0 selected} What position titles do these non-resident director staff hold? {open ended}

Number of part-time live-in staff enrolled in a graduate program:

0  
 1-5  
 6-10  
 11 or more

What is the position title(s) of the individual(s) who supervise the live-in, full-time resident directors in your department? {open ended}

Are you willing to participate in a phone screening if chosen to move forward in the case study selection process?

Yes  
 No

Thank you for taking the time to complete this questionnaire! I will be in touch regardless to share next steps. If you have questions in the interim, please contact Brittany McDaniel via email (BLANK@uga.edu) or mobile (XXX-XXX-XXXX).

[END OF SURVEY]

## F.2 Department Leader Interview Protocol

**TOPIC:** Exploring how departments of residence life support a culture of well-being for live-in, professional staff

**TIME OF INTERVIEW:** TBD

**DATE:** TBD

**PARTICIPANTS:** Directors of Residence Life

### **INTRO SCRIPT:**

Thanks again for agreeing to participate in today's interview. My name is Brittany McDaniel and I am a doctoral candidate at the University of Georgia and also work in residence life at Washington University in St. Louis. I started working full-time in residence life almost a decade ago and have lived in up until earlier this year. I'm fascinated with the concept of well-being and how as a society, the idea of wellness, maintaining holistic well-being, self-care, etc. have catapulted into being a part of mainstream culture with a lot of praise and criticism. I find that maintaining wellness is deeply personal, yet seeing that it is a matter that affects everyone it is important for workplaces to consider how they are providing initiatives, resources, etc. that help their staff take care of themselves.

The purpose of today's interview is to learn more about how you, as a director, facilitate and support a culture of well-being for live-in, professional staff, particularly those who identify as full-time resident directors.

As mentioned in the informed consent, this interview will be recorded to aid in the transcription of what is discussed. The recording will be destroyed upon completion of this study, and the transcription will use a pseudonym of your choice in place of your name. I will ask for your pseudonym shortly, so please begin thinking about this name.

Before we begin, there are a few more items I need to share as a formality.

**Informed Consent:** *Did you receive the informed consent form?* (If participant says ‘no’ - email them the form; if the participant says ‘yes’ - proceed)

As mentioned in the informed consent form, your participation is voluntary. You may not answer any question or discontinue the interview at any time. I will be jotting down some notes during our time together. Also, the audio-recording from today will be transcribed using a third-party transcription service. No identifiable information (e.g. name or personal characteristics) will appear in the transcript for this interview or in the research study findings. Your pseudonym might appear in the findings and will appear as part of the transcripts.

As a reminder, your identity will not be linked to your responses. In just a moment I will ask you to share your pseudonym, and only I will have access to the code sheet that contains the pseudonym/name match of all participants.

*Do you have any questions about the informed consent process?* (If no questions then move onto next question listed)

*Can you please verbally confirm that you agree to the terms outlined in the informed consent form?* (If participant says ‘no’ turn off the recording and end the video call; otherwise, move onto the next part)

*Now, share the pseudonym you wish to be referred to after our time ends today.* <ALLOW TIME FOR PARTICIPANT TO SHARE>

*Are there any accommodations you need that I should know about before starting the interview?* (If participant says ‘no’, move on to the next question; otherwise, inquire about accommodations)

*Do you have any questions at this time?* (If no questions, move onto asking the first question)

**INTERVIEW QUESTIONS:**

1. Tell me about why you chose to participate today.
2. Why is it important to you to foster a culture that supports well-being of staff?
3. What's it like to work in res life at <BLANK>? What are some of your departmental values and how do those show up in your daily work?
4. What are some examples of specific practices that support well-being of staff at <BLANK>?
5. How are you set up for success to support your staff's well-being?
  - a. Probing/Follow-up: what external support at the institution do you receive that makes it easier to do your work?
6. What are some of the obstacles at <BLANK> institution that make it harder to do your job and support your live-in staff?
7. Talk to me about the overall staff culture in your department. What are tension points?  
What are aspects of the work and culture that staff enjoy?
8. There are multiple definitions of what constitutes well-being. A popular model lists eight dimensions (emotional, environmental, financial, intellectual, occupational, physical, social, and spiritual), and these eight can be narrowed down to three areas of well-being: mental, physical, and social. Given these constructs, where do you perceive live-in staff's well-being flourishing and struggling prior to COVID?
  - i. How have you and other leaders at your institution/within your department supported staff well-being prior to COVID?
  - b. How has working as a housing professional during the current climate affected staff well-being?

- i. How have you and other leaders at your institution/within your department supported staff well-being during COVID and the other pandemics?
9. Since the early 2010s, the idea of ‘self-care’ has become mainstream in our society (for better or for worse) yet it has arguably been slow to become embraced in the workplace setting. Have you or your institution developed any policy or policies that supports the self-care of your live-in professional staff?
10. What are differences you perceive in your resident directors who take an active approach in engaging in self-care vs. those who don’t?
  - a. Other questions may include: What are observations you’ve made about your resident directors who participate in self-care? How do you observe this?
11. How do you promote well-being for staff you don’t perceive to be doing well? Can you provide an example of a time you made an observation of this nature, how you responded, and the reaction of the staff member?
12. One of the things that interests me is that most live-in staff are close in age to their residents. How does that factor in to how you think about the role of the live-in resident director? What observations have you made about the generational differences between you and your resident directors as it relates to self-care, work-life balance, etc.? What are parallels and differences in well-being needs between your RDs and residents on your campus?
13. Do you believe your RDs see themselves as employees of the university or the department?
  - a. When things don’t go their (RDs) way, how do they respond?
  - b. How do you see decision-making impacting their well-being?

- c. What is your responsibility as a supervisor and department to then help them improve their well-being? What is the responsibility on their part? Who teaches this to them?

14. Is there any other information you think might be helpful for me to know as it relates to this research study?

**WRAP-UP:**

Just as reminder, everything we talked about today will be kept confidential. I will be sending you a copy of your transcript to review soon. This will be an entire written document containing everything we discussed today. You're welcome to take a read through and let me know if there are any errors that should be corrected. The transcript will be in a Word document, so you will be able to submit track changes. This helps me in ensuring the data I collect is accurate.

*Are there any questions you have at this time?* (If participant says 'no' I will move onto the final point; otherwise, I will answer the question(s)).

The next phase of my study will be analyzing documents and conducting individual interviews with staff. I will send an email summarizing what I am asking for, but to share now, I need:

1. Relevant documents that will support me in conducting this study. Examples of documents include: mission, vision, goals of the department, staffing policies, organizational chart, position descriptions, budget allocations that support staff personally or professionally, event outlines, applicable emails, and institutional HR documents outlining employee well-being support. You may send these documents via attachments or by sharing the website links.
2. A comprehensive list of live-in (full-time) resident directors and their direct supervisors (name, title, and email) so I can invite them to participate in my study.

*Are there any questions about these requests?* (If participant says ‘no’ I will move onto the final point; otherwise, I will answer the question(s)).

Thanks again for taking the time to participate in my study! If you have any questions, don’t hesitate to reach out to me via email.

*Do you need me to reshare my email?* (If participant says ‘no’ I will move onto the final point; otherwise, I will provide my details).

Alright, have a good rest of your day!

### F.3 Resident Director Interview Protocol

**TOPIC:** Exploring how departments of residence life support a culture of well-being for live-in, professional staff

**TIME OF INTERVIEW:** TBD

**DATE:** TBD

**PARTICIPANTS:** Resident Directors

**INTRO SCRIPT:**

Thanks again for agreeing to participate in today's interview. My name is Brittany McDaniel and I am a doctoral candidate at the University of Georgia and also work in residence life at Washington University in St. Louis. I started working full-time in residence life almost a decade ago and have lived in up until earlier this year. I'm fascinated with the concept of well-being and how as a society, the idea of wellness, maintaining holistic well-being, self-care, etc. have catapulted into being a part of mainstream culture with a lot of praise and criticism. I find that maintaining wellness is deeply personal, yet seeing that it is a matter that affects everyone it is important for workplaces to consider how they are providing initiatives, resources, etc. that help their staff take care of themselves.

The purpose of today's interview is to learn more about your experience specifically as a resident director at <BLANK> institution and how you are provided support to take care of yourself through your **current** department.

As a reminder to what was in the informed consent, this interview will be recorded to aid in the transcription of what is discussed. The recording will be destroyed upon completion of this study, and the transcription will use a pseudonym of your choice in place of your name. I will ask for your pseudonym shortly, so please begin thinking about this name.

Before we begin, there are a few more items I need to share as a formality.

**Informed Consent: *Did you receive the informed consent form?*** (If participant says ‘no’ - email them the form; if the participant says ‘yes’ - proceed)

As mentioned in the informed consent form, your participation is voluntary. You may not answer any question or discontinue the interview at any time. I will be jotting down some notes during our time together. Also, the audio-recording from today will be transcribed using a third-party transcription service. No identifiable information (e.g. name or personal characteristics) will appear in the transcript for this interview or in the research study findings. Your pseudonym might appear in the findings and will appear as part of the transcripts.

As a reminder, your identity will not be linked to your responses. In just a moment I will ask you to share your pseudonym, and only I will have access to the code sheet that contains the pseudonym/name match of all participants.

***Do you have any questions about the informed consent process?*** (If no questions then move onto next question listed)

***Can you please verbally confirm that you agree to the terms outlined in the informed consent form?*** (If participant says ‘no’ turn off the recording and end the video call; otherwise, move onto the next part)

***Now, share the pseudonym you wish to be referred to after our time ends today.*** <ALLOW TIME FOR PARTICIPANT TO SHARE>

***Are there any accommodations you need that I should know about before starting the interview?*** (If participant says ‘no’, move on to the next question; otherwise, inquire about accommodations)

***Do you have any questions at this time?*** (If no questions, move onto asking the first question)

## INTERVIEW QUESTIONS:

1. Tell me why you decided to participate? *(make a note that if they felt coerced, that you will not proceed)*
2. Tell me (more) about why taking care of yourself and maintaining well-being is important to you personally and professionally.
3. What's it like to work at <BLANK> department? What do you enjoy? What makes it difficult to work here.
4. {PENDING} What are the values of the department and how do those influence the way you do your work? How, if at all, do these values differ from your personal values?
5. Leading up to the interview I asked you to snap a couple of pictures encapsulating how your well-being is affected or impacted by your experience as a live-in resident director. Share with me these photos (have them drop into Zoom file)
  - a. Tell me about how each photo symbolizes how your well-being is impacted
6. There are multiple definitions of what constitutes well-being. A popular model lists eight dimensions (emotional, environmental, financial, intellectual, occupational, physical, social, and spiritual), and these eight can be narrowed down to three areas of well-being: mental, physical, and social. Tell me a little how you take care of yourself in each capacity? Did you work in this department prior to COVID?
  - i. (If yes), what does support of your well-being look like from your department?? What are practices that drained your ability to take care of yourself?
    1. Talking points if struggling to answer: Was wellness talked about in training? How often related topics come up in supervision? How

requests for time off (or comp time, if it applies) are received/dealt with? What are phrases used that contradict explicit messages shared by departmental leaders? How do ‘other duties as assigned’ function in your department?

- b. The external, more macro environments can have an impact on one’s well-being as it relates to the work you do. How do these external forces affect the way you take care of yourself as it relates to being a live-in staff member?
  - i. Talking points if struggling to answer: How has your mental health been affected? Your physical health? Your social health – excluding, if possible, general impacts many in society have felt around limitations of being able to socialize in-person?
7. When you’re in a group, each member has an influence or role in shaping the culture of that group. What do you perceive your role in helping to create a culture of well-being within your department?
  - a. What are some ways you support directly in creating this culture?
8. When you talk to your friends who work in student affairs elsewhere, how do you describe the culture of working in your department?
  - a. Talking points if struggling to answer: what do you tell others as it relates to how healthy the culture is here at <BLANK>?
9. At the beginning I shared a little about my investment with this study, but what activated the conceptualization for this study was a Facebook post I saw in 2019. I’m going to pop it into the chat box to allow you to read it in a moment, but as you’re reading it, I want you to think about what we’ve talked about today specifically as it relates to well-being:

Pop into chat: “Hey everyone, I just wanted to know from you all's perspective: why does housing have so much burn out/problematic behavior? What are things that you all think can be done to make the positions/work environments better?”

- a. What are your initial thoughts when reading this?
- b. Does this inspire anything else your or other departments can do differently to improve environments particularly as it relates to supporting the well-being of live-in staff such as yourself to address the questions in this post?

**OR ASK**

10. Maintaining holistic well-being, self-care is all the rage right now. How do you think this position in general impacts well-being? What could be done differently, or in addition to what you've already shared, by your institution or within your own locus of control to improve well-being of live-in staff? (institutionally, personally)
11. Is there any other information you think might be helpful for me to know as it relates to this research study?

**WRAP-UP:**

Just as reminder, everything we talked about today will be kept confidential. I will be sending you a copy of your transcript to review soon. This will be an entire written document containing everything we discussed today. You're welcome to take a read through and let me know if there are any errors that should be corrected. The transcript will be in a Word document, so you will be able to submit track changes. This helps me in ensuring the data I collect is accurate.

*Are there any questions you have at this time?* (If participant says 'no' I will move onto the final point; otherwise, I will answer the question(s)).

Thanks again for taking the time to participate in my study! If you have any questions, don't hesitate to reach out to me via email.

***Do you need me to reshare my email?*** (If participant says 'no' I will move onto the final point; otherwise, I will provide my details).

Alright, have a good rest of your day!

#### F.4 Supervisor Interview Protocol

**TOPIC:** Exploring how departments of residence life support a culture of well-being for live-in, professional staff

**TIME OF INTERVIEW:** TBD

**DATE:** TBD

**PARTICIPANTS:** Direct Supervisors

**INTRO SCRIPT:**

Thanks again for agreeing to participate in today's interview. My name is Brittany McDaniel and I am a doctoral candidate at the University of Georgia and also work in residence life at Washington University in St. Louis. I started working full-time in residence life almost a decade ago and have lived in up until earlier this year. I'm fascinated with the concept of well-being and how as a society, the idea of wellness, maintaining holistic well-being, self-care, etc. have catapulted into being a part of mainstream culture with a lot of praise and criticism. I find that maintaining wellness is deeply personal, yet seeing that it is a matter that affects everyone it is important for workplaces to consider how they are providing initiatives, resources, etc. that help their staff take care of themselves.

The purpose of today's interview is to learn more about how facilitate and add to a culture of well-being support for the resident directors you supervise.

As a reminder to what was in the informed consent,. The recording will be destroyed upon completion of this study, and the transcription will use a pseudonym of your choice in place of your name. I will ask for your pseudonym shortly, so please begin thinking about this name.

Before we begin, there are a few key points of interest we will discuss.

**Informed Consent: *Did you receive the informed consent form?*** (If participant says ‘no’ - email them the form; if the participant says ‘yes’ - proceed)

As mentioned in the informed consent form, your participation is voluntary. You may not answer any question or discontinue the interview at any time. I will be jotting down some notes during our time together. Also, the audio-recording from today will be transcribed using a third-party transcription service. No identifiable information (e.g. name or personal characteristics) will appear in the transcript for this interview or in the research study findings. Your pseudonym might appear in the findings and will appear as part of the transcripts.

As a reminder, your identity will not be linked to your responses. In just a moment I will ask you to share your pseudonym, and only I will have access to the code sheet that contains the pseudonym/name match of all participants.

***Do you have any questions about the informed consent process?*** (If no questions then move onto next question listed)

***Can you please verbally confirm that you agree to the terms outlined in the informed consent form?*** (If participant says ‘no’ turn off the recording and end the video call; otherwise, move onto the next part)

***Now, share the pseudonym you wish to be referred to after our time ends today.*** <ALLOW TIME FOR PARTICIPANT TO SHARE>

***Are there any accommodations you need that I should know about before starting the interview?*** (If participant says ‘no’, move on to the next question; otherwise, inquire about accommodations)

***Do you have any questions at this time?*** (If no questions, move onto asking the first question)

**INTERVIEW QUESTIONS:**

1. Tell me why you decided to participate? *(make a note that if they felt coerced, that you will not proceed).*
2. Tell me (more) about why taking care of yourself and maintaining well-being is important to you personally and professionally.
3. What's it like to work at <BLANK> department? What do you enjoy? What makes it difficult to work here.
4. What are some examples of specific practices that support well-being of staff at <BLANK>?
5. How are you set up for success to support your staff's well-being?
6. What are some of the obstacles at <BLANK> institution that make it harder to do your job and support your live-in staff?
7. Talk to me about the overall staff culture in your department. What are tension points? What are aspects of the work and culture that staff enjoy?
8. There are multiple definitions of what constitutes well-being. A popular model lists eight dimensions (emotional, environmental, financial, intellectual, occupational, physical, social, and spiritual), and these eight can be narrowed down to three areas of well-being: mental, physical, and social. How important is it that a department supports the well-being of its staff? (use probing questions to ask for more details)
  - a. How is your well-being supported within your department? How does your ability to maintain wellness in each of the aspects influence your ability to support the well-being of your direct reports?
    - i. Talking points if struggling to answer: Is wellness talked about in training? How often related topics come up in supervision with your

supervisor? How requests for time off (or comp time, if it applies) are received/dealt with? When you are feeling tired, how does that show up in how you support your staff? How do you listen and respond to requests from your staff as it relates to them saying they feel tired, burned out, etc.?

9. Did you work in this department prior to COVID?
  - i. (If yes), what are ways your department supported the well-being of staff, particularly that of live-in (full-time) resident directors?
  - a. {PENDING/MOVE} How has working as a housing professional during the current climate affected staff well-being?
    - ii. Talking points if struggling to answer: How has your mental health been affected? Your physical health? Your social health – excluding, if possible, general impacts many in society have felt around limitations of being able to socialize in-person?
10. What do you perceive your role in helping to create a culture of well-being within your department?
  - a. What are some ways you support directly in creating this culture?
  - b. Describe how your role fluctuates in creating this culture during times of crises vs. other times?
11. One of the things that interests me is that most live-in staff are close in age to their residents. How does the closeness in age factor in to how you think about their role? What are parallels and differences in well-being needs between your RDs and residents on your campus?

12. Do you believe your RDs see themselves as employees of the university or the department?
- a. When things don't go their (RDs) way, how do they respond?
  - b. How do you see decision-making impacting their well-being?
  - c. What is your responsibility as a supervisor and department to then help them improve their well-being? What is the responsibility on their part? Who teaches this to them?
13. Maintaining holistic well-being, self-care is all the rage right now. How do you think this position in general impacts well-being? What could be done differently, or in addition to what you've already shared, by your institution or within your own locus of control to improve well-being of live-in staff? (institutionally, personally)
14. Is there any other information you think might be helpful for me to know as it relates to this research study?

**WRAP-UP:**

Just as reminder, everything we talked about today will be kept confidential. I will be sending you a copy of your transcript to review soon. This will be an entire written document containing everything we discussed today. You're welcome to take a read through and let me know if there are any errors that should be corrected. The transcript will be in a Word document, so you will be able to submit track changes. This helps me in ensuring the data I collect is accurate.

*Are there any questions you have at this time?* (If participant says 'no' I will move onto the final point; otherwise, I will answer the question(s)).

Thanks again for taking the time to participate in my study! If you have any questions, don't hesitate to reach out to me via email.

***Do you need me to reshare my email?*** (If participant says 'no' I will move onto the final point; otherwise, I will provide my details).

Alright, have a good rest of your day!



