

Academic Community-Engaged Learning and Student Mental Health and Wellness: Understanding The Lived Experiences of Undergraduate Students

Dissertation Overview

Stephanie J. Brewer

Abstract

The purpose of this study was to illuminate the experiences of undergraduate students who participated in academic community-engaged learning, specifically as those experiences related to student mental health and wellness. The data for this qualitative interpretative phenomenological analysis (IPA) was collected through semistructured interviews with seven undergraduate students. Analysis resulted in the identification of essential components of the student community-engaged learning experience as it relates to students' mental health and wellness and included three main themes: Identity (Head), Belonging (Heart), and Agency (Hands). The implications of these findings are many, including pedagogical considerations for community-engaged classrooms and campuswide considerations for the inclusion of high-impact practices, as well as community partner implications. Ultimately, the findings of this study will lead to a better informed, nuanced, macrolevel strategy that higher education institutions can use to impact the state of student mental health and wellness broadly.

Keywords: community-engaged learning, student experience, mental health, wellness, trauma-informed



Mental health and wellness should be a top priority for higher education institutions (HEIs) nationally. Mental health is a persistence and retention issue, wherein students with a mental health disability tend to earn lower grades, have less social engagement on campus, be less likely to seek out or receive campus services, and have lower rates of persistence to graduation (Amaya et al., 2019; Cleary et al., 2011; Goss et al., 2010; Hartley, 2013; Hawley et al., 2016; Jorgensen et al., 2018; National Council on Disability, 2017; Quin, 2017). Perhaps even more importantly, mental health and wellness is a life-or-death issue. The American College Health Association (2018), in the *National College Health Assessment*, estimated that approximately 11% of undergraduate students have seriously considered suicide, and approximately 2% of students have attempted suicide (p. 14). HEIs are struggling to meet the increasing demand resulting from the rise in the number of students reporting difficulty with mental health (Ackerman et al., 2014; Katz & Davison, 2013; Kruisselbrink Flatt, 2013; Marsh & Wilcoxon, 2015; National Council on Disability, 2017). Due to the invisible nature of mental health and wellness concerns, it is difficult for HEIs to identify students who could benefit from services.

As the demand for student mental health services increases, it is important to consider all strategies that HEIs could implement to promote improved student mental health and wellness as well as improved

persistence and retention. Community-engaged learning, an experiential pedagogy in which students participate in educational activities in partnership with the community, has been presented as a proactive, macrofocused strategy that HEIs can use to promote positive outcomes among its participants, including positive impacts on mental health and wellness (Attree et al., 2011; Checkoway, 2007; Conway et al., 2009; Flanagan & Bundick, 2011; O'Meara et al., 2011; Ortega-Williams et al., 2020; Swaner, 2007). Community-engaged learning practices are thought to have a connection to student mental health and wellness, as evidenced by participant reports of improved decision-making and problem-solving skills, increased self-confidence and self-esteem, and improved social relationships (Checkoway, 2007; Conway et al., 2009; Flanagan & Bundick, 2011; O'Meara et al., 2011; Ortega-Williams et al., 2020; Swaner, 2007). More specifically, student participants have reported improved physical and emotional health and wellness, less feelings of depression, loneliness, and anxiety (Attree et al., 2011; Conway et al., 2009; Flanagan & Bundick, 2011), lower incidence of substance abuse (Checkoway, 2007), and improved socially responsive knowledge and moral development (Conway et al., 2009; Swaner, 2007).

Although some research has shown a connection between student participation in community-engaged learning practices and positive mental health and wellness outcomes, other findings have revealed potential negative mental health and wellness outcomes, such as increased anxiety, stress, and exhaustion (Attree et al., 2011; Kulick et al., 2017). The evidence is sometimes contradictory regarding the impact of participation on students' mental health and wellness outcomes. In addition, little research has directly examined the lived experiences of the student participants, specifically as it relates to their mental health and wellness. We need to learn more about the nuances of the lived experiences of community-engaged learning student participants in order to better understand the role HEIs can play in supporting students who participate in community-engaged learning, in an effort to maximize potential positive impacts and to mitigate potential negative impacts on student mental health and wellness. This study examined the following research questions:

1. What are the lived experiences of undergraduate student participants of academic community-engaged learning, specifically as they relate to their mental health and wellness?
2. How do undergraduate student participants of academic community-engaged learning make sense of the impact of these pedagogical experiences on their mental health and wellness?

Theoretical and Conceptual Framework

Community-engaged learning scholarship provides the theoretical grounding for my research. Community-engaged learning is supported by the theoretical foundations built by Dewey (1938), Kolb (1984), Mezirow (1997), Kiely (2005), and Kuh (2008). Each of these foundational theories differs from the others, but they all contribute to our understanding of how students experience community-engaged learning, how they make meaning of their experiences, and how that meaning impacts their learning and lives. Welch and Plaxton-Moore (2019) provided a triadic theoretical framework that helps to synthesize these foundations of community-engaged learning:

Engaged teaching and learning are composed of the following components: (a) epistemology as multiple ways of knowing with an emphasis on the intellectual development of a student as well as generating new knowledge that builds capacity for society at large, (b) ontology as a way of being or doing in the world by applying what is learned and experienced, and (c) critical reflection to contemplate and make meaning of the learning and doing. (p. 39)

Welch and Plaxton-Moore's (2019) theoretical framework provides the base for my conceptual framework, shown in Figure 1. My conceptual framework situates the existing scholarship on community-engaged learning and student mental health and wellness within this existing theoretical base. This resulting conceptual framework provides an overall picture of how I understand the phenomenon of community-engaged learning and specifically its impact on student mental health and wellness. Items noted in *bold italics* are those that I have mapped onto Welch and Plaxton-Moore's existing frame-

work. To read more about this conceptual framework and the corresponding relevant literature, see the full dissertation (Brewer, 2023).

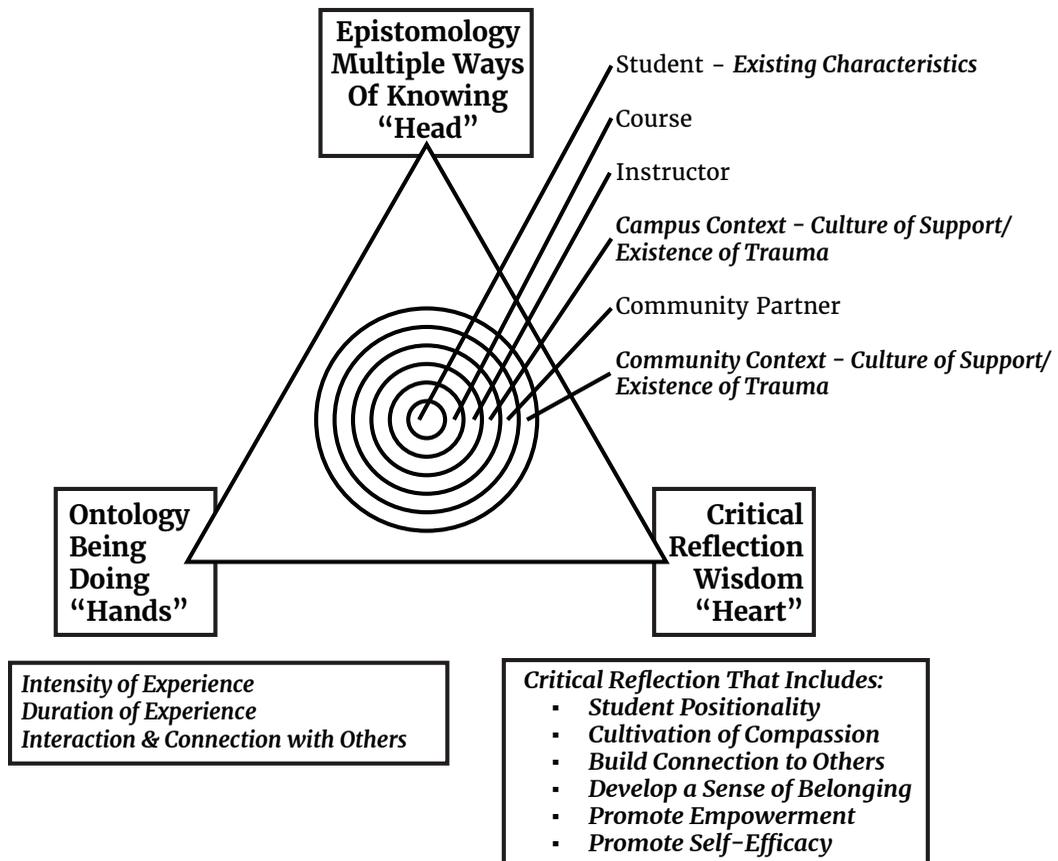
Brief Overview of Relevant Literature

The existing scholarship shows that community-engaged learning experiences provide mental health and wellness benefits for student participants (Attree et al., 2011; Checkoway, 2007; Conway et al., 2009; Flanagan & Bundick, 2011; O’Meara et al., 2011; Ortega-Williams et al., 2020; Swaner, 2007). Scholars have pointed out that these benefits include increased feelings of connection (Bronsteen, 2016; Checkoway, 2007), an improved sense of belonging (Flanagan & Bundick, 2011; Ribera et al., 2017; Soria et al., 2012), increased feelings of empowerment (Attree et al., 2011; Conway et al., 2009; Swaner, 2007), and increased self-efficacy (Bronsteen, 2016; Conway et al., 2009). Scholars have also agreed that

these student benefits are impacted by certain factors related to the experience, such as intensity and duration of the experience (Conway et al., 2009). Additionally, it has been noted that providing intentional critical reflection opportunities is essential to producing these student benefits (Bronsteen, 2016; Conway et al., 2009).

Although less research exists on the potential negative impacts to student participants’ mental health and wellness, scholars agree that these potential negative impacts exist. Specifically, scholars have found negative impacts for those students who were already experiencing high stress as a result of existing conditions such as a disability (Attree et al., 2011), as well as for those students who identify as part of marginalized communities (Kulick et al., 2017). Additionally, it is important to understand the potential negative impact of community trauma on the student experience (Falkenburger et al., 2018; Pinderhughes et

Figure 1. Conceptual Framework for Understanding Community-Engaged Learning and Student Mental Health and Wellness at Higher Education Institutions



al., 2015; Weinstein et al., 2014). Although more information is needed to better understand the experience of these students, it is agreed that HEIs have a responsibility to avoid these potential negative outcomes and to support and prepare their student participants in these experiences.

Gaps remain in the existing literature regarding what we know about community-engaged learning and student mental health and wellness outcomes. The definition of “community-engaged learning” has expanded to include multiple implementation strategies (direct service, advocacy, community building, etc.), curricular models, and modalities for delivery (virtual, in-person, hybrid). The majority of existing scholarship is based on traditional direct service. Therefore, we do not yet know if participation in different types of community-engaged learning results in differences in student mental health and wellness outcomes. Additionally, are student experiences different for virtual versus in-person community engagement? How do these experiences differ for students who are experiencing poor wellness outcomes, or high anxiety, already? How do students make meaning of their experiences, and to what do they attribute their mental health and wellness outcomes? HEIs need to know more about the student experience of community-engaged learning in order to better understand how they may best support the mental health and wellness of student participants.

Methodology

This study used interpretative phenomenological analysis (IPA) to illuminate the lived experiences of students who participated in community-engaged learning. The main objective of IPA is to elucidate experience and to understand how individuals make sense of their experience. IPA is a method that allows the researcher to gather rich descriptions and personal meanings of lived experience (Pietkiewicz & Smith, 2012/2014). IPA is grounded in the basics of phenomenology and hermeneutics. Although IPA draws on the foundations of phenomenology in that it is interested in examining the lived experiences of the participants, it is different in that it does not aim to transcend, or rise beyond, our everyday assumptions. IPA acknowledges that people exist in a broader context and world and are in relationship with others, and participants and researchers cannot remove this existence from their

experience of the world; therefore, IPA seeks to understand the meaning made by the participants about those experiences (Larkin & Thompson, 2012; Pietkiewicz & Smith, 2012/2014; Shinebourne, 2011).

Before gathering data, IRB approval was obtained, and participants were recruited. At a large Midwest Research 1 university, the researcher identified seven different undergraduate academic courses that included a community-engagement requirement. Recruitment emails were sent to 134 undergraduate students. The student participants were selected from the self-identified interested pool of students to ensure representation from multiple courses and disciplines, as well as varied demographic backgrounds, in order to ensure that the phenomenon under study was considered from multiple perspectives or lived experiences. Seventeen students voiced interest in participating in the study, 10 individuals were invited to interview, and seven students confirmed and participated in interviews. As part of this study, participants were asked to talk about their community-engaged learning experiences and how those experiences related to their mental health and wellness. Participants were not asked to disclose personal or confidential information about their mental health and wellness status, including such information as diagnoses, symptomatology, or treatment. The interviews were semistructured, which allowed for the telling of experience in rich detail (Larkin & Thompson, 2012; Pietkiewicz & Smith, 2012/2014). As part of the interview process, students were asked to submit an example of an assignment they completed as part of the community-engaged learning portion of their course. Possible submissions included reflection papers, journal entries, discussion board submissions, and other related artifacts. The submitted artifact allowed the researcher to access participant thoughts and experiences as they occurred during the community-engaged learning experience, as opposed to the reflective comments obtained during interviews.

Analysis and Key Findings

IPA seeks to understand the examined phenomenon as a whole (Dibley et al., 2020; Groenewald, 2004; Pietkiewicz & Smith, 2012/2014). IPA directs the researcher to fully immerse themselves in the data in order to best understand the participant’s experience and meaning making

(Pietkiewicz & Smith, 2012/2014). The researcher followed the IPA analysis steps as outlined by Larkin and Thompson (2012). After considerable time and reflection, three main themes were identified—informed by the researcher’s conceptual framework—that provided a meaningful way to talk about the experiences of all the participants: (1) Identity (Head), (2) Belonging (Heart), and (3) Agency (Hands). Table 1 provides a summary of these themes.

The first theme, Identity (Head), highlighted that reflection on identity, and knowledge development around identity, are essential parts of the mental health and wellness experience of community-engaged

learning. It is important that these reflection experiences be restorative, give space to explore personal identity-based trauma, and provide opportunities for validation, so that participants are more likely to feel safe to continue exploring new ways of thinking and knowing. One participant stated:

I know that this really did bring out like a lot of emotion to things that I’ve been through. I’ve never seen it be categorized in a specific way. But it has, has really helped me figure out myself and who and how I am.

This finding is supported by existing literature. Critical reflection is identified as

Table 1. Summary of Findings

Theme	Summary
Identity (Head)	<ul style="list-style-type: none"> • Reflection and knowledge development around the topic of identity are essential parts of student participants’ mental health and wellness experience. • Intentional facilitation of reflection activities focused on identity allowed students to explore their preexisting understandings of who they are as individuals, and who they are in relation to others. • Reflection and knowledge development on the topic of identity are inherently emotional experiences. • In-class discussions, and opportunities to share personal stories, allowed students to explore their personal identity and develop a new understanding of self. • Providing space for restorative reflection around identity, and the opportunity to process these reflections with others in the class, resulted in participants feeling a validation of self.
Belonging (Heart)	<ul style="list-style-type: none"> • Developing a sense of belonging is an essential part of the mental health and wellness experience of community-engaged learning participants. • Intentional facilitation of opportunities to practice vulnerability, empathy, and compassion, as well as opportunities to observe others doing the same, helped participants to feel connected to one another, to their classroom community, the campus at large, and the broader community. • Feeling validated and cared about by their peers, faculty, and community partner(s), as well as having the opportunity to validate and care for others, improved participants’ sense of belonging and ultimately had a direct impact on student mental health and wellness.
Agency (Hands)	<ul style="list-style-type: none"> • Developing agency is an essential part of the mental health and wellness experience of community-engaged learning participants. • Students developed their voice in the classroom and community by making decisions and telling their stories. • Students developed a sense of purpose by struggling with the concept of impact, including what it means to be impactful as well as questioning their own ability to make an impact. • Ultimately, this process of developing agency resulted in a sense of pride and gratitude for their experience and had a positive impact on student mental health and wellness.

a key component of community-engaged learning and can lead to knowledge development and behavior change (Ash & Clayton, 2009; Jacoby, 1996). The experiences of this study's participants add to the idea that critical reflection on identity should be focused on the cultivation of compassion for self as well. Participants described the impact of participating in restorative conversations around identity with their peers, faculty, and community partners wherein they felt encouraged to disrupt their existing perceptions of their social identities and their associated histories.

The second theme, Belonging (Heart), highlighted that developing a sense of belonging is an essential part of the mental health and wellness experience of community-engaged learning. Participants' sense of belonging was facilitated by the practice and reciprocation of vulnerability, empathy, and compassion. One participant stated:

I think that the only thing is just like I think that stronger connections are formed through shared vulnerability and like openness. And so even my saying, like from my covering that or her reading about it, like that is a vulnerable piece of me and that, that she responded to really openly. And I think that in general that makes her really, that like, opens up the ability to have a stronger connection.

A second participant shared:

One of the things that felt very impactful to me is that people, whether they're from different communities, different cultures, some identities that they held, whether that was like their sexuality and stuff like that, was never accepted. And they, this was one of their first times being in a group that would accept the identity of them. And I think that was very impactful. To me to see and see the emotions and the backstory of them as people. It was such a common occurrence.

This finding is supported by existing literature. Soria et al. (2012) defined "sense of belonging" as a student's sense of connection and affiliation with their community. The participants of the current study all discussed the various ways in which their

community-engaged learning experience contributed to their sense of belonging. They specifically highlighted the relationships they were able to build with their classmates and how those relationships helped them to feel connected and important to others. The participants of this study also highlighted that their developed sense of belonging did not just happen by chance. Rather, they noted the impact of in-class reflections and in-community experiences that helped them to practice vulnerability, empathy, and compassion for others. It needs to be noted, however, that being vulnerable and showing compassion for others was only half of the scenario. Participants in this study also highlighted the importance of a reciprocal experience with their peers, faculty, and community partners. They not only shared vulnerability, but they also witnessed vulnerability; they not only showed care for others, but they felt cared for by others as well.

The final theme, Agency (Hands), highlighted that agency is an essential part of the mental health and wellness experience of community-engaged learning. Participants practiced taking control over their environment and telling their stories, and also struggled with what it means to have impact while ultimately working to understand their sense of purpose. One participant shared:

The positive emotions are immediately following the moment when I'm having fun with the kids and the kids are enjoying themselves. But when I zoom out to look at the grand scheme of things, it's more negative because it does feel like making an impact, yes, but there's so much more that needs to be done.

Another participant commented:

I think it goes back to the idea of the impact that I can have with my effort and my time within a community. I think that has changed my idea of thinking about what my time and effort means and what me continuing my education can mean for being able to make a bigger impact to our community.

This finding is supported by existing literature. Attree et al. (2011) defined student agency as "the feeling that they are

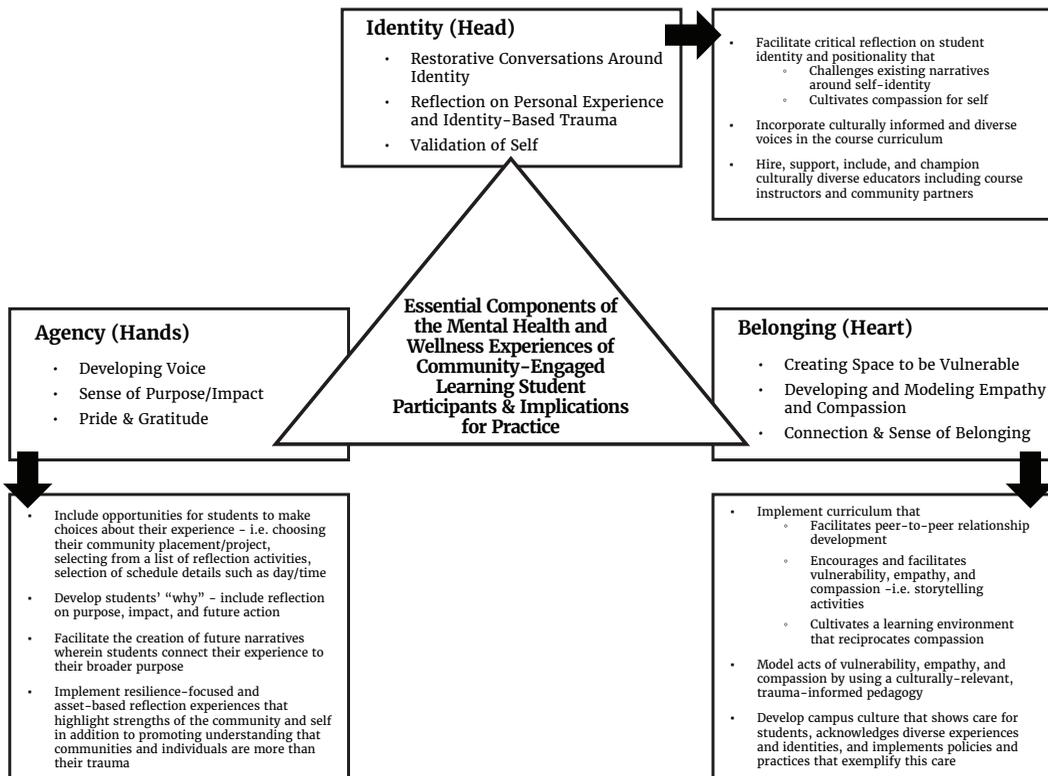
being useful to others, feeling in control of events, being able to express ideas and having an awareness of individual rights” (p. 252). The participants of the current study all discussed some of the ways that their community-engaged learning experience contributed to their sense of agency. Specifically, students noted that this sense of agency resulted in part from having the opportunity to make decisions about their engagement experience and having the opportunity to tell their stories. The findings of this study also noted that students developed a sense of agency by grappling with the idea of impact, including questioning both what it means to be impactful and their ability to generate their desired impact. The participants of the current study struggled with understanding their purpose in relation to the community experience. They asked questions about why they were engaged in the community, what they could do while they were there, and how they may be able to further their impact in the future. It was the reflection on these questions, and the ability to make sense of them, that ultimately led to students feeling empowered

rather than stuck. Community-engaged learning pedagogy creates tension that can decrease student mental health and wellness in the short term (Attree et al., 2011; Kulick et al., 2017; Swaner, 2007). This emotional experience can be processed, and reframed, through the intentional use of resilience-focused and asset-based reflection opportunities. These types of reflection opportunities pose questions, or engage students in readings or other activities, that help them to focus on community strengths rather than deficits, on individual students’ strengths as well as their classmates’, and to encourage the understanding that individuals and communities are more than their trauma (Ginwright, 2018).

Implications

This section summarizes and briefly outlines relevant implications from this study. Figure 2 summarizes these essential components of the mental health and wellness experiences of community-engaged learning student participants and the resulting implications for practice. Additionally, implications for

Figure 2. Essential Components of the Mental Health and Wellness Experience of Community-Engaged Learning Student Participants and Implications for Practice



higher education practice broadly will be elaborated.

Implications for Identity (Head)

Community-engaged learning faculty-practitioners should facilitate critical reflection on student identity and positionality. Further, this reflection should challenge students' existing narratives around self-identity and work toward cultivating compassion for self. This reflection process should allow space for students to share their own stories and hold space for the processing of emotion that will inevitably be tied to the sharing of those stories. Additionally, faculty-practitioners should incorporate culturally informed and diverse voices into the course curriculum through scholarship and readings, testimonies, community partners, and the faculty themselves. Thus, in order to increase the likelihood that students will see themselves represented in their classroom faculty, HEIs should hire, support, include, and champion culturally diverse educators throughout campus.

Implications for Belonging (Heart)

Faculty-practitioners who are facilitating community-engaged learning experiences should implement curriculum that facilitates peer-to-peer relationship development. These relationships can then be used as a base for facilitating vulnerability, empathy, and compassion between classmates. Critical reflection activities should be designed to incorporate these acts of vulnerability and help students learn to develop empathy and compassion for others. Faculty-practitioners should focus on the cultivation of a learning environment that reciprocates compassion and should not leave this reciprocation up to chance. Reflection activities should be developed and implemented to ensure this reciprocation is happening. Additionally, faculty-practitioners should be student-centered, should incorporate trauma-informed pedagogy in the classroom and broader campus, and should consider the inclusion of brave space concepts and practices. These frameworks exist in the literature and can be used as guides (Arao & Clemens, 2013; Cless & Goff, 2017; Davidson, 2017; Harper & Neubauer, 2021; Harrison et al., 2023; Henshaw, 2022; Wood, 2021).

Implications for Agency (Hands)

Faculty-practitioners should include oppor-

tunities for students to make choices about their community-engaged learning experience. Students might implement such choice through choosing their community partner/project, choosing which reflection activities they will complete, having a voice in the due dates and timelines of the course, and so on. The reflection activities in the course should help students think about their "why," including questions around their purpose, their definitions of impact, their understanding of their own impact, and future action. Students may benefit from the facilitation of future-focused narratives, wherein they connect their community-engaged learning experiences to their broader goals and purpose. Finally, faculty-practitioners should implement resilience-focused and asset-based reflection experiences that highlight the strengths of the community as well as each student's own strengths as an individual. These reflections should be intentional in helping students understand that individuals and communities are more than their trauma.

Implications for Higher Education Institutions Broadly

In addition to these implications surrounding identity, belonging, and agency, implications for HEIs broadly also remain. First, as the results of this study have shown, community-engaged learning as a pedagogy has the potential to be incredibly emotionally impactful, particularly if critical reflection is included that explores identity-based trauma and community trauma. In-class activities around vulnerability, empathy, and compassion have the potential to impact students in negative ways. Faculty who choose to include community-engaged learning pedagogy in their courses should do so intentionally and thoughtfully. This type of classroom learning requires a commitment from the faculty-practitioner, and thus it should not be considered an add-on, but rather a fully integrated course component.

Second, campuses must consider similar implications when making decisions around setting graduation requirements involving high-impact practices as community-engaged learning. Community-engaged learning experiences have very real-world implications, for both students and community partners, and therefore it is important to consider faculty motivations for including such experiences in their courses. If faculty are required to include community-engaged

learning but are not personally motivated to facilitate this type of curriculum, the intentional care needed to support these learning experiences may not exist. Additionally, if community-engaged learning is a campus requirement, then the campus also needs to consider how they are providing the financial and human resources needed to support this work, how they are training their faculty in these areas, how they are supporting and removing barriers for student participation (transportation, financial support for work release, etc.), and whether the community partners are interested and/or ready to support that scale of student involvement. This same level of consideration should be taken by HEIs when including community engagement and community-engaged learning in campus strategic plans and other visionary work.

Finally, this study has implications that relate to community partners and site selection. Community partners are considered coeducators in community-engaged learning experiences, and as such, they have a similar set of responsibilities for student learning, student support, and, in the case of this study, student mental health and wellness. HEIs frequently offer a focus on faculty training and support for this type of pedagogy, but we also need to consider the training and support that our community partners receive in regard to their role as coeducators. Community partners and HEIs

need to have clear expectations around partner roles and the responsibilities for taking on these students as learners. Consideration for community partner orientation and training should be similar to that taken for faculty-practitioners. Additionally, HEIs need to provide the financial and human resources needed to support these partnerships and the orientation, training, and support required to work toward student learning objectives together.

The purpose of this qualitative IPA study was to illuminate the experiences of undergraduate students who participated in academic community-engaged learning, specifically as those experiences related to student mental health and wellness. Data analysis resulted in three main themes—Identity (Head), Belonging (Heart), and Agency (Hands)—which provided a meaningful way to talk about the experiences of all the participants. The study results concerning the lived experiences of community-engaged learning participants will help HEIs to better understand their role in supporting these students, and to create trauma-informed, healing-centered, and resilience-focused community-engaged learning practices.

Link to full dissertation: <https://www.proquest.com/openview/e0912aca9ab55624cb26d3dc8aa3bf86/1?pq-origsite=gscholar&cbl=18750&diss=y>



About the Author

Stephanie J. Brewer is the program director for the Community Engagement Scholars and academic programs manager at the Center for Community Engaged Learning at Michigan State University. Her research interests focus on community-engaged teaching and learning and student mental health and wellness. She received her PhD in higher, adult, and lifelong education from Michigan State University.

References

- Ackerman, A. M., Wantz, R. A., Firmin, M. W., Poindexter, D. C., & Pujara, A. L. (2014). Mental health service providers: College student perceptions of helper effectiveness. *Professional Counselor*, 4(1), 49–57. <https://doi.org/10.15241/ama.4.1.49>
- Amaya, M., Donegan, T., Conner, D., Edwards, J., & Gipson, C. (2019). Creating a culture of wellness: A call to action for higher education, igniting change in academic institutions. *Building Healthy Academic Communities Journal*, 3(2), 27–40. <https://doi.org/10.18061/bhac.v3i2.7117>
- American College Health Association. (2018). *American College Health Association—National college health assessment II: Reference group executive summary fall 2018*. https://www.acha.org/documents/ncha/NCHA-II_Fall_2018_Reference_Group_Executive_Summary.pdf
- Arao, B., & Clemens, K. (2013). From safe spaces to brave spaces: A new way to frame dialogue around diversity and social justice. In L. M. Landreman (Ed.), *The art of effective facilitation: Reflections from social justice educators* (pp. 135–150). Stylus Publishing,
- Ash, S. L., & Clayton, P. H. (2009). Generating, deepening, and documenting learning: The power of critical reflection in applied learning. *Journal of Applied Learning in Higher Education*, 1(1), 25–48. <https://hdl.handle.net/1805/4579>
- Attree, P., French, B., Milton, B., Povall, S., Whitehead, M., & Popay, J. (2011). The experience of community engagement for individuals: A rapid review of evidence. *Health & Social Care in the Community*, 19(3), 250–260. <https://doi.org/10.1111/j.1365-2524.2010.00976.x>
- Brewer, S. J. (2023). *Academic community-engaged learning and student mental health and wellness: Understanding the lived experiences of undergraduate students* [Unpublished doctoral dissertation]. Michigan State University.
- Bronsteen, J. (2016). Measuring and improving the effect of higher education on subjective well-being. In D. W. Harward (Ed.), *Well-being and higher education: A strategy for change and the realization of education's greater purposes* (pp. 21–36). Bringing Theory to Practice.
- Checkoway, B. N. (2007). Engaged learning, student mental health, and civic development: Can we demonstrate the relationship? *Peer Review*, 9(3). <https://link.gale.com/apps/doc/A170116052/AONE?u=anon~c63f1c14&sid=googleScholar&xid=9943103e>
- Cleary, M., Walter, G., & Jackson, D. (2011). Not always smooth sailing: Mental health issues associated with the transition from high school to college. *Issues in Mental Health Nursing*, 32(4), 250–254. <https://doi.org/10.3109/01612840.2010.548906>
- Cless, J. D., & Goff, B. S. N. (2017). Teaching trauma: A model for introducing traumatic materials in the classroom. *Advances in Social Work*, 18(1), 25–38. <https://doi.org/10.18060/21177>
- Conway, J. M., Amel, E. L., & Gerwien, D. P. (2009). Teaching and learning in the social context: A meta-analysis of service learning's effects on academic, personal, social, and citizenship outcomes. *Teaching of Psychology*, 36(4), 233–245. <https://doi.org/10.1080/00986280903172969>
- Davidson, S. (2017). *Trauma-informed practices for postsecondary education: A guide*. Education Northwest. <https://ecampusontario.pressbooks.pub/app/uploads/sites/1721/2021/10/trauma-informed-practices-postsecondary-508.pdf>
- Dewey, J. (1938). *Experience and education*. Collier.
- Dibley, L., Dickerson, S., Duffy, M., & Vandermause, R. (2020). *Doing hermeneutic phenomenological research: A practical guide*. Sage.
- Falkenburger, E., Arena, O., & Wolin, J. (2018). *Trauma-informed community building and engagement*. Urban Institute. https://www.urban.org/sites/default/files/publication/98296/trauma-informed_community_building_and_engagement_0.pdf
- Flanagan, C., & Bundick, M. (2011). Civic engagement and psychosocial well-being in college students. *Liberal Education*, 97(2), 20–27.

- Ginwright, S. (2018). *The future of healing: Shifting from trauma informed care to healing centered engagement* (GPV/KCV Occasional Paper 25). Grandparents Victoria. <https://grandparents.com.au/wp-content/uploads/2018/08/OP-Ginwright-S-2018-Future-of-healing-care.pdf>
- Goss, H. B., Cuddihy, T. F., & Michaud-Tomson, L. (2010). Wellness in higher education: A transformative framework for health related disciplines. *Asia-Pacific Journal of Health, Sport and Physical Education*, 1(2), 29–36. <https://doi.org/10.1080/18377122.2010.9730329>
- Groenewald, T. (2004). A phenomenological research design illustrated. *International Journal of Qualitative Methods*, 3(1), 42–55. <https://doi.org/10.1177/160940690400300104>
- Harper, G. W., & Neubauer, L. C. (2021). Teaching during a pandemic: A model for trauma-informed education and administration. *Pedagogy in Health Promotion*, 7(1), 14–24. <https://doi.org/10.1177/2373379920965596>
- Harrison, N., Burke, J., & Clarke, I. (2023). Risky teaching: Developing a trauma-informed pedagogy for higher education. *Teaching in Higher Education*, 28(1), 180–194. <https://doi.org/10.1080/13562517.2020.1786046>
- Hartley, M. T. (2013). Investigating the relationship of resilience to academic persistence in college students with mental health issues. *Rehabilitation Counseling Bulletin*, 56(4), 240–250. <https://doi.org/10.1177/0034355213480527>
- Hawley, L. D., MacDonald, M. G., Wallace, E. H., Smith, J., Wummel, B., & Wren, P. A. (2016). Baseline assessment of campus-wide general health status and mental health: Opportunity for tailored suicide prevention and mental health awareness programming. *Journal of American College Health*, 64(3), 174–183. <https://doi.org/10.1080/07448481.2015.1085059>
- Henshaw, L. A. (2022). Building trauma-informed approaches in higher education. *Behavioral Sciences*, 12(10), Article 368. <https://doi.org/10.3390/bs12100368>
- Jacoby, B. (1996). *Service-learning in higher education: Concepts and practices*. Jossey-Bass Publishers.
- Jorgensen, M., Budd, J., Fichten, C. S., Nguyen, M. N., & Havel, A. (2018). Graduation prospects of college students with specific learning disorders and students with mental health related disabilities. *International Journal of Higher Education*, 7(1), 19–31. <https://doi.org/10.5430/ijhe.v7n1p19>
- Katz, D. S., & Davison, K. (2014). Community college student mental health: A comparative analysis. *Community College Review*, 42(4), 307–326. <https://doi.org/10.1177/0091552114535466>
- Kiely, R. (2005). A transformative learning model for service-learning: A longitudinal case study. *Michigan Journal of Community Service Learning*, 12(1), 5–22. <http://hdl.handle.net/2027/spo.3239521.0012.101>
- Kolb, D. (1984). *Experiential learning: Experience as the source of learning and development*. Prentice Hall.
- Kruisselbrink Flatt, A. (2013). A suffering generation: Six factors contributing to the mental health crisis in North American higher education. *College Quarterly*, 16(1). <https://collegequarterly.ca/2013-vol16-num01-winter/flatt.html>
- Kuh, G. D. (2008). Excerpt from “High-impact educational practices: What they are, who has access to them, and why they matter.” *Association of American Colleges and Universities*, 14(3), 28–29.
- Kulick, A., Wernick, L. J., Woodford, M. R., & Renn, K. (2017). Heterosexism, depression, and campus engagement among LGBTQ college students: Intersectional differences and opportunities for healing. *Journal of Homosexuality* 64(8), 1125–1141. <https://doi.org/10.1080/00918369.2016.1242333>
- Larkin, M., & Thompson, A. (2012). Interpretative phenomenological analysis. In A. Thompson & D. Harper (Eds.), *Qualitative research methods in mental health and psychotherapy: A guide for students and practitioners* (pp. 99–116). John Wiley & Sons.
- Marsh, C. N., & Wilcoxon, S. A. (2015). Underutilization of mental health services among

- college students: An examination of system-related barriers. *Journal of College Student Psychotherapy*, 29(3), 227–243. <https://doi.org/10.1080/87568225.2015.1045783>
- Mezirow, J. (1997). Transformative learning: Theory to practice. *New Directions for Adult and Continuing Education*, 1997(74), 5–12. <https://doi.org/10.1002/ace.7401>
- National Council on Disability. (2017). *Mental health on college campuses: Investments, accommodations needed to address student needs*. <https://www.ncd.gov/report/mental-health-on-college-campus-investments-accommodations-needed-to-address-student-needs/>
- O'Meara, K., Sandmann, L. R., Saltmarsh, J., & Giles, D. E., Jr. (2011). Studying the professional lives and work of faculty involved in community engagement. *Innovative Higher Education*, 36(2), 83–96. <https://doi.org/10.1007/s10755-010-9159-3>
- Ortega-Williams, A., Wernick, L. J., DeBower, J., & Brathwaite, B. (2020). Finding relief in action: The intersection of youth-led community organizing and mental health in Brooklyn, New York City. *Youth & Society*, 52(4), 618–638. <https://doi.org/10.1177/0044118X18758542>
- Pietkiewicz, I., & Smith, J. A. (2014). *A practical guide to using interpretative phenomenological analysis in qualitative research psychology*. Stowarzyszenie Psychologia i Architektura. <https://doi.org/10.14691/CPJ.20.1.7> (Original work published 2012)
- Pinderhughes, H., Davis, R. A., & Williams, M. (2015). *Adverse community experiences and resilience: A framework for addressing and preventing community trauma*. Prevention Institute.
- Quin, M. J. (2017). *Student perceptions of the impact of participation in community college mental health counseling on retention, graduation, and transfer* (Publication No. 10642649). [Doctoral dissertation, Mississippi State University]. ProQuest Dissertations Publishing. <https://www.proquest.com/docview/1977450870>
- Ribera, A. K., Miller, A. L., & Dumford, A. D. (2017). Sense of peer belonging and institutional acceptance in the first year: The role of high-impact practices. *Journal of College Student Development*, 58(4), 545–563. <https://doi.org/10.1353/csd.2017.0042>
- Shinebourne, P. (2011). The theoretical underpinnings of interpretative phenomenological analysis (IPA). *Existential Analysis: Journal of the Society for Existential Analysis*, 22(1). <https://link.gale.com/apps/doc/A288874145/LitRC?u=anon~b9b39fbd&sid=googleScholar&xid=471f95d4>
- Soria, K. M., Troisi, J. N., & Stebleton, M. J. (2012). Reaching out, connecting within: Community service and sense of belonging among college students. *Higher Education in Review*, 9, 65–85. <https://hdl.handle.net/11299/150026>
- Swaner, L. E. (2007). Linking engaged learning, student mental health and well-being, and civic development: A review of the literature. *Liberal Education*, 93(1), 16–25.
- Weinstein, E., Wolin, J., & Rose, S. (2014). *Trauma informed community building: A model for strengthening community in trauma affected neighborhoods*. BRIDGE Housing Corporation.
- Welch, M., & Plaxton-Moore, S. (2019). *The craft of community-engaged teaching and learning: A guide for faculty development*. Stylus Publishing.
- Wood, J. M. (2021). Teaching students at the margins: A feminist trauma-informed care pedagogy. In J. Carello & P. Thompson (Eds.), *Lessons from the pandemic* (pp. 23–37). Palgrave Macmillan. https://doi.org/10.1007/978-3-030-83849-2_3