

Navigating trauma: Proximity, wellbeing and work-integrated learning in higher education

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This paper conducts an interdisciplinary exploration into the concept of trauma within work-integrated learning (WIL), emphasizing the importance of 'proximity' as a novel extension of trauma within this context. The central focus lies in conceptualizing fresh dimensions for a WIL wellness model that prioritizes community connectedness over individual autonomy. The paper sheds light on the broader landscape of trauma within higher education, acknowledging that students' lived experiences are characterized by global threats, local stressors, and traumatic events. By addressing the challenges faced by students at the University of Canterbury in Christchurch, New Zealand, this work intertwines the themes of trauma, wellbeing, and WIL to present a comprehensive view of the opportunities and challenges within higher education. The Proximity Trauma Impact Model for Work-Integrated Learning (PTIM-WIL) signifies a forward-thinking framework aimed at preparing students for the dynamic landscapes of WIL and the post-graduation workplace.

Keywords: Trauma-responsive, wellbeing, mental health, resilience, distress, proximity, model

By the time students' study for qualifications at universities, they have likely experienced some form of trauma that has impacted their overall wellness, their worldview, their way of being, their cognitive development, and their sense of self (Jones & Nangah, 2021). While the nature and proximity of that trauma can look quite different from individual to individual (e.g., transgenerational trauma versus acute trauma), its residue permeates higher education. As work-integrated learning (WIL) educators and practitioners, who place students into authentic workplace environments to build employability competencies, the authors of this paper especially understand the need to consider elevated pastoral care for overall student wellbeing. At the same time, however, there may be a lack of operational understanding of how to implement trauma-responsive approaches into classrooms and workplace learning environments to enable students to adapt and cope in the event of traumatic stimuli.

This conceptual paper explores the complex relationship between trauma, wellbeing, and WIL in higher education from an interdisciplinary perspective. Introducing the proximity trauma impact model for work-integrated learning (PTIM-WIL), this work aims to enhance existing understandings of WIL wellbeing by addressing both global and local proximal stressors through the lens of trauma. Through an interdisciplinary conceptual exploration, the role of trauma in various WIL experiences is critically examined. Insights from students at the University of Canterbury in Christchurch, New Zealand are drawn upon. Emphasizing the significance of 'proximity' as related to trauma, this study extends this concept uniquely to the context of WIL. While broad discussions of trauma encompass its correlations with self-efficacy, agility, and resilience, as well as its impact on WIL practices, the primary focus of

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this work is on conceptualizing dimensions of a WIL wellbeing model that prioritizes community connectedness over individual autonomy.

Additionally, this work highlights the broader context of trauma in higher education, acknowledging the lived experiences of students characterized by transgenerational trauma, global threats, local stressors, and traumatic events and the impact on their study and engagement with WIL. Recognizing the challenges faced by students in Christchurch, the authors of this paper examine how trauma is exacerbated by specific events, such as the 2010-2011 earthquakes, a terrorist mosque shooting in 2019, and the impact of COVID-19 lockdowns. The authors recognize that similar magnitudes of trauma are experienced by students in many other global contexts and offer the Christchurch example as a case that can inform other location and other trauma-inducing events. Furthermore, the authors consider the role of educators in supporting a student cohort that may be easily unsettled and who may struggle with resilience, especially in the competitive environment of higher education.

Throughout, this paper weaves together the themes of trauma, wellbeing, and WIL, presenting a holistic view of the challenges and opportunities within higher education. The PTIM-WIL emerges as a forward-looking conceptual model, designed to support WIL leaders in their efforts to equip students for the evolving landscapes of WIL and the workplace upon graduation.

POSITION AND CONTEXT

Relationships with trauma can be multivariant and highly individualized, and as the authors of this paper interrogate a trauma-responsive approach within WIL, this group acknowledges their positionality in the context of the University of Canterbury and Christchurch with respect to their own relationships to trauma. This group comes from different disciplinary backgrounds (e.g., accounting, criminal justice, education, linguistic anthropology and WIL) and employed in both academic and non-academic roles. Their joint interest in WIL brought them together as a research group with the intention of sharing good practice and elevating University of Canterbury's WIL research profile.

WIL practitioners often have the occasion to observe student wellbeing through student reflections, which are, of course, key assessments in WIL experiences. As this group of authors got to know each other, they quickly ascertained that they had a shared perception of their students across the different disciplines: their students demonstrated signs of what the authors characterized as trauma. This group shared anecdotes of how their students have expressed their trauma both overtly (e.g., self-harm, loss of emotional regulation) and passively (burnout, absenteeism and withdrawal) in their work-integrated placements. The group also noted how observations of student behavior resonated with their histories of traumatic experiences, leading them to consider how interventions, mitigations, or strategies that would help students navigate through their own trauma while engaged in WIL could be developed.

To better understand their students' behaviors, the authors considered the localized context of traumatic experiences that might have impacted these cohorts of students. Having a higher education institute situated in Christchurch provides a unique opportunity to explore the concepts of the proposed PTIM-WIL, underpinned by trauma-informed pedagogy. The city of Christchurch has experienced several distressing events that have attracted significant education research interest. Both researchers and students at University of Canterbury have living memory of the Christchurch earthquakes in 2010 and 2011, the March 2019 mosques terrorist attack, and the recent ordeal of the COVID-19 pandemic.

The development of the model was initially constructed through an examination of the group's collective experiences of coping with trauma as residents of Christchurch and assisting their students and higher education communities in living through those distressing incidents. Further, through the process of collection, review, and synthesis of current WIL literature and trauma-informed pedagogy, a model that benefits students, educators, and other stakeholders of WIL was developed, and is described below.

DEFINITIONS OF TRAUMA

In the following discussion, this paper draws on the conversations related to trauma-responsive teaching within higher education institutions (HEIs) to frame the definitions of trauma, and adopted terminology associated with trauma has been curated from a number of leading sources and outlined in Griffith University's *Framework for Trauma-Informed Tertiary Teaching and Learning* (Tsantefski et al., 2020, p. 3). An assortment of these definitions is offered in Table 1.

TABLE 1: Definitions of trauma.

Complex trauma	Traumatic events that are chronic, interpersonal, and occur within the context of caregiving relationships; the term also describes the pattern of symptoms associated with such experiences (Kliethermes et al., 2014, p. 339).
Re-traumatization	A sense of reliving the traumatic event triggered by reminders including feeling numb, having negative thoughts and mood, and feeling agitated or wound up (American Psychiatric Association, 2013).
Trauma	Trauma results from an event, series of events, or set of circumstances that is experienced by an individual as physically or emotionally harmful or threatening and that has lasting adverse effects on the individual's functioning and physical, social, emotional, or spiritual well-being (Substance Abuse and Mental Health Services Administration [SAMHSA], 2014 p. 3).
Traumatization	Very frightening or distressing (that is, traumatic) events that result in temporary or prolonged reactions "that move from acute symptoms to more severe, prolonged, or enduring mental health consequences (e.g., posttraumatic stress and other anxiety disorders, substance use and mood disorders) and medical problems (e.g., arthritis, headaches, chronic pain)" (SAMHSA, 2014, p. 7)
Vicarious trauma	Although compassion fatigue and secondary trauma refer to similar physical, psychological, and cognitive changes and symptoms that [people] may encounter when they work specifically with clients who have histories of trauma, vicarious trauma usually refers more explicitly to specific cognitive changes, such as in worldview and sense of self (SAMHSA, 2014, p. xviii).

Based on the above definitions, trauma is related to a state of events or experiences that interrupt psychological, social, and physical safety, and that the impact of trauma is related to proximity (Wozniak et al., 2020). Trauma can be experienced directly (e.g., was injured in the Christchurch earthquake), indirectly (e.g., know someone who was injured in the earthquake), and/or vicariously (e.g., listens to someone's retelling of their experience of the earthquake). Depending on its type or severity, trauma may also resonate across geographical boundaries (e.g., the 9/11 attack) and through time (e.g., forced relocation of indigenous groups and enslavement).

Certainly, trauma and wellness are correlational. When students experience trauma disruption, they may show signs of elevated stress and/or distress in a variety of ways. Because trauma can transcend time, space, and event, and may be triggered unpredictably, trauma-informed WIL calls for a complex approach to student wellness that considers proximity across all WIL types and experiences.

Throughout the following discussion, this paper refrains from investigating trauma from a clinical perspective; instead, trauma is described as it relates to the context of wellness and the WIL experience in higher education.

WORK-INTEGRATED LEARNING AND WELLNESS

The provision of meaningful and authentic learning experiences, usually off-campus and in workplace settings, is the cornerstone of WIL (Smith et al., 2019). The increasing demand for WIL comes from various stakeholders in response to a rapidly changing world, but in the higher education context, the primary stakeholder is still the student, with research showing that WIL is valued highly by students who rate it as the most significant part of their undergraduate programmes (Wolf, 2010).

It is well established in the literature that WIL experiences positively impact student performance, self-efficacy, and employability (DeClou et al., 2013; Drysdale et al., 2016; Raelin et al., 2011). WIL is a key strategy for enhancing student employability outcomes and lifelong learning capabilities (Ferns et al., 2022; Martin et al., 2011). More specifically, WIL is seen to enhance skill outcomes such as teamwork, communication, self-management, and problem-solving, as well as employment prospects and students' understanding of the world of work (Jackson, 2013). Students gain many benefits from engaging in WIL such as career clarification, industry connections that can lead to rapid employment upon graduation, critical thinking, research abilities, time management, disciplined thinking, appreciation of the need for study topics, and the ability to engage with workplace norms and professional behavior (Ferns et al., 2014).

At the same time, WIL students are reported to experience a higher degree of academic and personal stress as well as possible distress, including "increased psychological and financial stress, social isolation, study/life imbalance and exposure to exploitation or unlawful work practices" (Gillett-Swan & Grant-Smith, 2018, p. 129). That stress may be compounded in vulnerable student populations, who may be more likely to leave the WIL experience before any positive wellbeing intervention can be put into place (Drysdale et al., 2022). Students involved in WIL may also face a distinctive set of risks while in the workplace learning environment that may include threat to physical trauma or injury and psychological safety (Fleming & Hay, 2021).

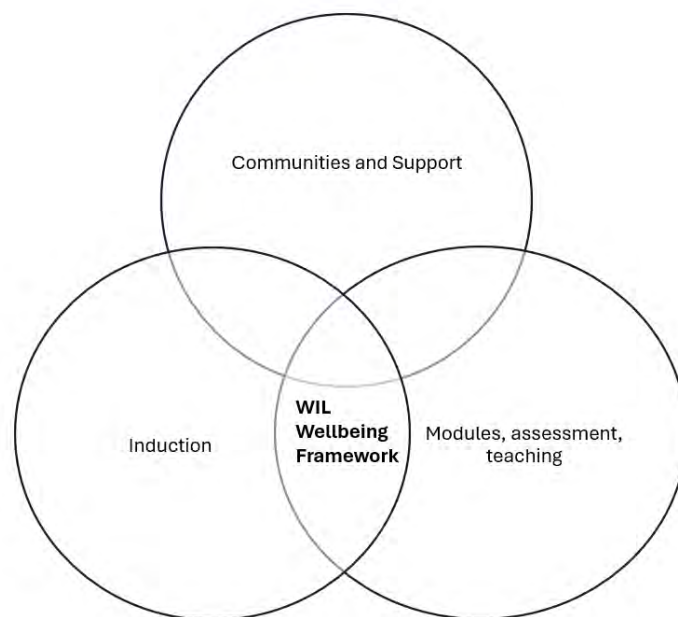
Wellbeing of students in WIL experiences then, is an essential aspect of successful WIL, and the conversation of wellbeing in WIL literature takes a broad approach, encompassing both the individual and that individual's environment. The literature also points out that students are navigating aspects of emotional, psychological, social, cognitive, physical, and economic/environmental spaces that

contribute to their wellbeing. Gillett-Swan and Grant-Smith (2018) describe these spaces as concentric, overlapping circles, suggesting that a student's wellbeing is fluid, ideally with movement toward integration. Wellbeing during WIL, then, can be defined as: "An individual's capacity to manage the social, economic, personal, and physical factors that impact on the work-integrated learning experience and how the work-integrated learning experience impacts on an individual's social, economic, personal, and physical wellbeing domains" (Gillett-Swan & Grant-Smith, 2018, p. 133).

In this view, an individual can affect and also be affected by external stressors, such as participation in WIL, and personal factors, such as socioeconomic status, mental capacity, age, family, and cultural assimilation have broad impact on a student's capacity to successfully complete a WIL experience (Gillett-Swan & Grant-Smith, 2018). The onus of supporting WIL students falls on HEIs as well as WIL practitioners to ensure that student wellbeing needs are being met. This support may look like risk mitigation (e.g., carefully vetting the industry and community partner organizations who host WIL students or implementing student and partner inductions). This support may also potentially involve implementing pastoral care plans that support students to build resilience and coping mechanisms (e.g., Drysdale et al., 2022), as well as community (e.g., peer support and belonging) throughout the WIL experience, which leads to reduction in stress and are considered to be "protective factors" for student wellbeing (McBeath et al., 2018, p. 39). Regardless, a wellness framework would provide student support before, during, and after the WIL experience and would include contribution from all WIL stakeholders, including partner organizations, the university, and the student (Connor et al., 2021; Drysdale et al., 2016; Fleming & Hay, 2021; Grant-Smith et al., 2017; Jackson, 2013; Konstantinou et al., 2023). Moreover, the wellness framework would be woven into the fabric of the institution, including in both the teaching and administrative spaces, to accommodate a diversified student cohort (Gillett-Swan & Grant-Smith, 2018).

In their 2023 chapter considering WIL wellbeing, Konstantinou et al. propose a framework that includes integration of many components across a student's WIL experience, and illustrates the complex relationship between stakeholders with respect to student wellbeing (Figure 1). Their framework builds on the Jisc and Emerge Education (2021) study on student wellbeing and weaves together the relationship between various aspects of WIL. Table 2 outlines Jisc and Emerge Education's (2021) four principles of wellbeing.

FIGURE 1: Work-integrated learning wellbeing framework.



Note. Redrawn from Konstantinou et al., 2023, p. 538.

TABLE 2: Wellbeing principles outlined by Jisc & Emerge Education (2021)

Principle 1	Wellbeing is for everybody, that is, the entire population is affected.
Principle 2	Wellbeing is lifelong and requires lifelong learning and skills development to build resilience.
Principle 3	Wellbeing needs to be embedded throughout the curriculum health and education gains should not be seen as separate.
Principle 4	Wellbeing should not be the sole concern of student health and mental support services but involve the entire community.

Note. Based on wellbeing principles outlined in *Student and Staff Wellbeing* (p. 24-25), by Jisc & Emerge Education, 2021.

This framework emphasizes the connection between all aspects of a student's WIL experience over the entirety of that student's experience. Moreover, it critically identifies the involvement of communities and support that are connected to, but not directly involved with, the student's WIL experience. The intersection within the framework suggests the interdependency of learning and health, as outlined in Principle 3.

While the connection between wellbeing and WIL has been examined in the literature, what is less familiar is the connection between trauma and wellbeing in WIL. Trauma is noted as a risk from placement (Fleming & Hay, 2021). Certainly, aspects of trauma, such as secondary traumatic stress, burnout, and compassion fatigue are indirectly related to student stressors (Craig & Sprang, 2010;

Drysdale et al., 2020; Gillett-Swan & Grant-Smith, 2018). Furthermore, wellness models in WIL speak to the intersection of stakeholder responsibility in supporting student wellbeing (e.g., Jisc & Emerge Education, 2021, Principle 4).

At the same time, wellness models in WIL have been built in relation to the stressors and risks that are incurred during, and as a result of, the WIL experience itself, with less attention paid to the position or context of the students (or any stakeholders for that matter) as they are entering into and navigating the WIL experience. Such attention to trauma could inform the whole of the WIL experience, from selecting placements that are less likely to re-traumatize, to purposefully aligning support services throughout the WIL experience, and upskilling supervisors on effective mentoring with respect to trauma. The discussion around trauma-responsive approaches within higher education literature is well-established and orienting WIL to this approach of wellbeing serves to benefit all participant stakeholders in WIL.

TRAUMA-RESPONSIVE MOVEMENTS IN HIGHER EDUCATION

Mulvogue and colleagues (2023) describe the multiple transitions that students entering higher education face such as developing new social relationships, leaving existing support networks, adjusting to what may feel like a competitive learning environment, adapting to new work/life balance situations, and developing a new sense of personal autonomy. Further, these authors point out that taking on courses with WIL experiences may compound the stressors for students who come to university with preexisting mental health issues.

The common higher education response to student mental health and wellbeing challenges is to develop programs that support students in their development of self-efficacy and resilience. These programs and initiatives aim to provide students with the strategies and supports they need to be successful in their academic studies and career aspirations. Advocates of these approaches argue that these supports must go beyond identification and provide opportunities that meet the needs of the individual student (Mulvogue et al., 2023).

Further, higher education is increasingly recognizing that many students have already experienced trauma in their lives (Jones & Nangah, 2021). Anderson and colleagues (2023) summarize the diverse sources of individual trauma for college students, including childhood experiences, poverty, racism, and sexual violence. Henshaw (2022) reports that higher education students are also indirectly exposed to trauma through curriculum choices, learning experiences, being placed in the field or professional environments, and even while conducting research. Trauma has also been recognized as a social phenomenon (Anderson et al., 2023) that can be produced, for example, through collective experiences (e.g., pandemics, natural disasters), through organizational and systemic behaviors (e.g., prejudicial or unfair practices in industries, healthcare, education), or through membership in marginalized groups (e.g., race, gender, indigenous heritage) who have experienced societal oppression or subjugation. Supporting wellbeing and resilience in these instances requires a more coordinated, campus-wide approach in higher education.

Since the COVID-19 pandemic, higher education has been undergoing a shift from being reactive to students' trauma (e.g., through individual identification and counselling), to a proactive approach that stretches across campus services and into the classroom (Anderson et al., 2023; Wells, 2023). A common framework that higher education turns to for guidance in creating a response to students who have experienced trauma is based in trauma-informed care from the Substance Abuse and Mental Health Services Administration (SAMHSA) (2014, p. 11) in the United States.

This framework includes six core principles:

1. Safety,
2. Trustworthiness and transparency,
3. Peer support,
4. Collaboration and mutuality,
5. Empowerment, and
6. Cultural, historical, and gender issues.

In an educational context, this framework suggests that educational institutions create an environment in which all students feel physically, psychologically, and emotionally safe; where administration and educators take time to create relationships with students that are built on trust and dialogue; in which programs and intentional schemes support peer interaction and sharing of lived experience; where collaborations are genuine and built on a foundation of levelling power differentials and shared decision-making; where people across the organization are viewed as agentic and a strengths-based approach is taken for providing growth opportunities; and importantly, that works against institutional racism and other forms of historical systemic oppression.

This framework was developed based on a review of the existing research literature at the time, consultation with clinical professionals, and reports from survivors. It was developed to inform the practice of the health professions and to be adapted for child welfare, education, criminal, and juvenile justice, military, and other contexts where traumatic experience should be recognized with systemic and agency-connected approaches for response and care (SAMHSA, 2014). This framework sits within four key assumptions about how to enact a trauma-informed approach within an organization known as the Four Rs, namely: "A program, organization, or system that is trauma-informed realizes the widespread impact of trauma and understands potential paths for recovery; recognizes the signs and symptoms of trauma in clients, families, staff, and others involved with the system; and responds by fully integrating knowledge about trauma into policies, procedures, and practices, and seeks to actively resist re-traumatization" (SAMHSA, 2014, p. 9, original emphasis).

In adopting frameworks in higher education for developing trauma-informed approaches to student support, the literature raises some key issues to consider. First, if framework elements such as safety and peer support are to be taken seriously, it must be deeply considered who the students within higher education institutions are. It is understood that not all higher education students will respond to trauma-informed approaches in the same way, particularly, undergraduate and graduate students have been shown to perceive trauma-informed higher education strategies and practices differently (Wells, 2023). A study of the United Kingdom Widening Participation initiative, a government scheme to address the historic under-representation of some groups in higher education (e.g., from low-income backgrounds; geographic under-representation; first generation; underrepresented ethnic backgrounds; refugees or asylum seekers; those from military families), concluded that these students seemed to have higher exposure to traumatic experiences (Jones & Nangah, 2021) compared to students outside of this initiative. The authors suggest that to respond to the needs of these students and support their integration into higher education, elements such as understanding their psychological wellbeing, creating collaborative higher education strategies, developing a deeper understanding of the student lived experience to inform curriculum and teaching, and nurturing stronger relationships with the students to understand who they are would help the students feel less alienated and enable them to thrive. These recommendations bear a strong resemblance to the SAMHSA (2014) framework. Fundamentally, this approach suggests that the higher education organization change to fit the needs

of these newly recruited student groups, rather than asking the students to learn to fit into the existing organizational norms and practices.

Second, a key area of development in higher education to bring the SAMHSA (2014) framework to life has been in the recognition and development of trauma-informed pedagogies. In their critical review, Anderson et al. (2023) conclude that “trauma-informed pedagogy’s stated commitment to redefining the student-teacher relationship to promote equity, wellbeing, and healing, future empirical scholarship must re-center students’ voices, experiences, and meaning-making in both research and practice” (p. 126). These authors found that the empirical literature on trauma-informed pedagogy is dominated by practitioner reflections in which higher education staff reflect on their own teaching practice. While the authors acknowledge the importance of engaging higher education educators in a deep analysis of their own teaching practices, they also note that:

the preponderance of practitioner reflections has left little room for a deep examination of how students make sense of trauma-informed principles and their application. This literature assumes students and instructors conceptualize these values and want to see them applied in similar ways. (p. 132)

Thus, if empowerment and collaboration are to be taken seriously within the higher education context, ways to engage students in fundamental activities like research and co-construction of curriculum is a critical next step.

An example of this co-construction is illustrated in a study of responsive and engaging curriculum practice (O’Steen & Perry, 2012). This case study of service-learning illustrates how a university can be responsive in times of crisis (in this case, the post-earthquake period in Christchurch, New Zealand). The study describes the lessons that the university took away for designing curriculum that is based in lived experiences outside of traditional classroom environments; had strong academic content that is current, relevant, timely; valued dialogue and student agency in their own learning; and created opportunities for students to make sense of a traumatic event with tools they gained from community engagement and intellectual support from their university instructors.

Third, if the element of cultural, historical, and gender issues in the SAMHSA (2014) framework is to be taken up with seriousness by higher education institutions, then institutions must move past notions of cultural competence and cultural humility and toward a more critical and action-oriented approach to ensuring these issues are uncovered and actively addressed (Henshaw, 2022). This author makes five recommendations for how to engage the four main assumptions outlined by the SAMHSA (2014) report (realizing the prevalence of trauma; recognizing the signs; responding; and resisting retraumatization) through the lenses of cultural sensitivity and responsiveness. These recommendations are:

- Require training and education for all staff, including leadership, with a focus on self-interrogation and locating oneself culturally, racially, and linguistically with an eye toward revising policy and programs.
- Understand safety as both a physical and virtual concern and working to address micro-aggressions in communications and curriculum choices, increasing transparency in times of traumatic events, and openly discussing resources available that support the whole of the community.

- Use intentional positive disruption in re-creating institutional policies to enhance the diversity of the staff, ensure equal opportunities to students in research and leadership roles, and ensure a range of voices and perspectives are represented.
- Recognize and celebrate intersectional identities within the higher education community by offering opportunities to develop affinity groups, create spaces for collective dialogues, promote collaborations, and enhance peer support.
- Use student-centered approaches to explore how trauma-informed approaches impact students' lives and experiences, with some emphasis given to students from historically marginalized groups.

Finally, while the empirical literature on trauma-informed pedagogies is burgeoning, higher education scholars are calling for more research on trauma-informed approaches taken at the institutional or systems level of higher education (Henshaw, 2022). The element of trustworthiness and transparency of the SAMHSA (2014) framework rests on the institution's values, policies, and practices. This is a signal that calls leaders to account for their engagement in trauma-informed practice and not laying all of the work onto individual lecturers and service providers. It is also a call for institutions to create a human experience of care and community for both students and employees in higher education, a shift away from the service model (Anderson et al., 2023) that is based on the transactional elements of clients, benefits, and confrontation.

PROPOSING A PROXIMITY TRAUMA IMPACT MODEL FOR WORK-INTEGRATED LEARNING

To create the PTIM-WIL (Figure 2), this paper draws on the concept of proximity to reimagine the WIL wellbeing model (Konstantinou et al., 2023) and the SAMHSA (2014) trauma supporting framework that have been presented in this paper. A standard understanding of proximity is nearness, and this model applies the idea of *being near* to three dimensions: time, space, and relationships. Proximity is the chosen concept to orient the position and context of students as they enter into and navigate through their WIL experience. The WIL experience is placed in the center of the model to focus on this learning experience. Overall, the model integrates known good practice from the WIL literature to support wellbeing (e.g., Konstantinou et al., 2023) and then reminds practitioners to be proactively prepared to support students who have experienced trauma or may be exposed to trauma or retraumatization during WIL, by paying attention to the trauma-informed framework from SAMHSA (2014).

Moving outwards from the center of the model, proximity is viewed as the interconnectedness and dependency of the key actors in WIL through their relationships. WIL relationships comprise those between and among the students, their community of peers, the HEI, and the workplace (Jisc & Emerge Education, 2021; Konstantinou et al., 2023). Ensuring that the model reflects the powerful role that peer groups and community support can play is critical, particularly in the context of the shared trauma that students at UC have experienced. Representing the WIL relationships as inclusive of these four actors also gives attention to the shared responsibilities of the workplace and the HEI for the pastoral care and mental health supports for students while they are engaged in WIL. It is also important to note that all of these actors are working together across the various dimensions of time in WIL, each having responsibility for helping to develop and maintain the wellbeing of the students while also attending to the particular needs of students who have experienced trauma, who might be susceptible to secondary or vicarious trauma, and to be proactive against retraumatization.

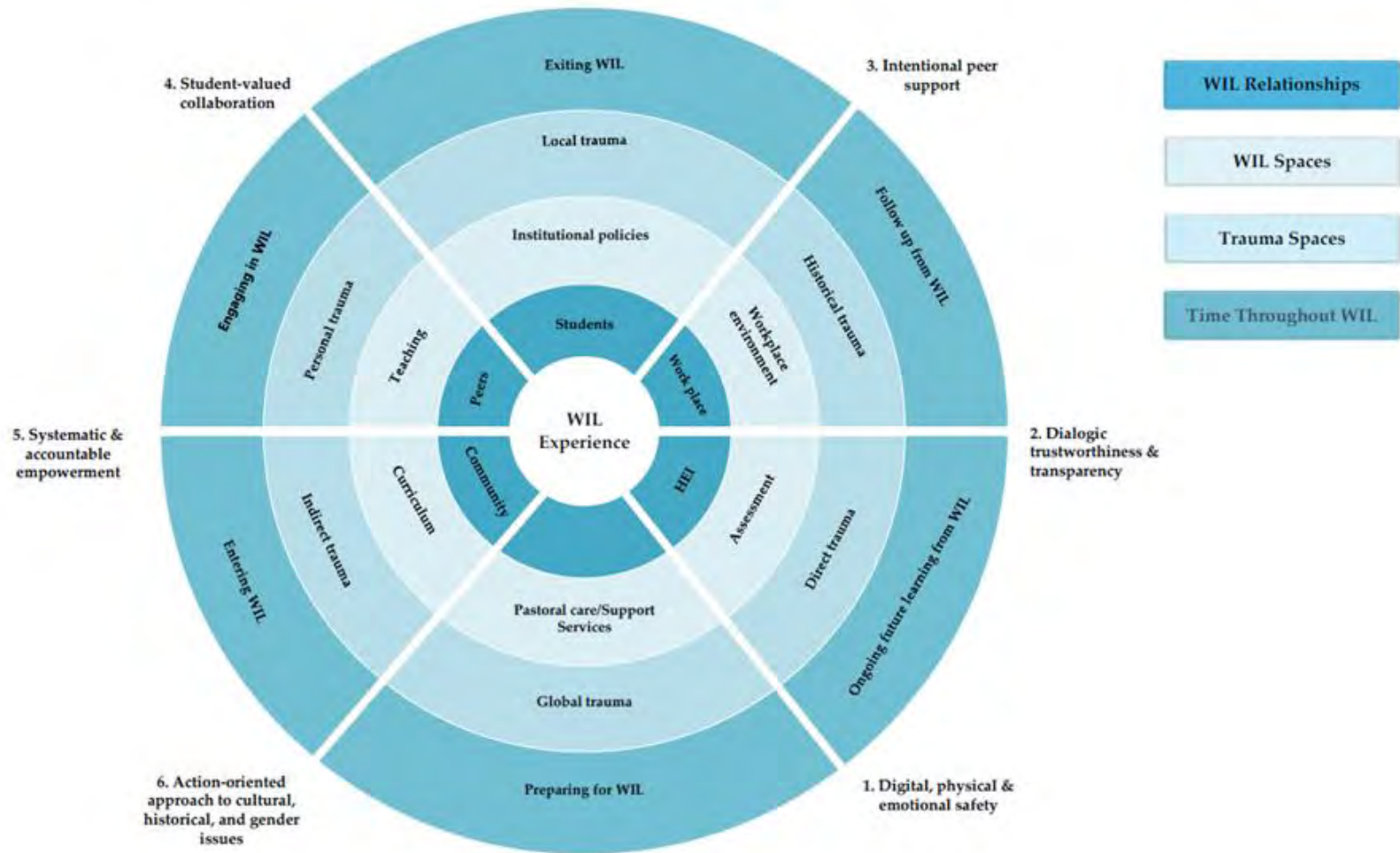
The next two circles represent the proximity of space—both the space of WIL supports and the space of trauma. WIL supports are typically located in the variety of mechanisms that HEIs sponsor (e.g., mentoring programs, wellness centers, financial support, WIL placement support). The model reminds HEIs that these supports are also located in the institutional and workplace policies and environments, as well as through the support systems and programs provided for students of WIL. In this model, attention is drawn to trauma-informed pedagogical approaches that have been identified in the research literature, thus, locating WIL support in curriculum, teaching, and assessment. Traumatic experiences happen in different spaces—they are located in personal lived experience; in local events that affect a group of people or regional population (e.g., the Christchurch earthquakes and mosque attacks); in historical traumas that are shared by a group (e.g., systemic oppression or long-lasting effects of war); and they are in a global context such as environmental crises, economic crashes, and large-scale catastrophes.

Finally, to be proximal in time suggests that the dimension of time in the WIL experience is considered. In other words, practices that take place at a variety of time points—as students prepare and enter a WIL experience, as they engage and then exit a WIL experience, and importantly, as Jisc and Emerge Education (2021) point out, as the WIL learning is followed up into the future to attend to lifelong learning, must be attended to.

Like many models in the social sciences, the PTIM-WIL is meant to depict a state of desired conditions for institutions and practices (Miller & Page, 2007). The model represents how the elements of this social system interact to create an environment and give shape to practice. Toward this goal, this model represents the conditional elements of the SAMHSA (2014) framework that describe the institutional and workplace conditions of the social system needed to create a supportive environment by being trauma-informed in policy, procedure, and practice. Attention to these elements should allow the institution, the workplace, students, and the community to be proactive and not reactive with regard to traumatic experience in the past and in the future. The six elements of the SAMHSA framework have been intentionally renamed to highlight the critiques from more recent literature reviews and research as discussed earlier:

1. Digital, physical, and emotional safety;
2. Dialogic trustworthiness and transparency;
3. Intentional peer support;
4. Student-valued collaboration and mutuality;
5. Systemic and accountable empowerment; and
6. Action-oriented approach to cultural, historical, and gender issues.

FIGURE 2: Proximity trauma impact model for work-integrated learning (PTIM-WIL).



These elements radiate from the center and cut across all three dimensions of proximity. This signals that all actors are responsible for practices and enactment of these framework elements, all spaces need to attend to these elements, and these elements should be accounted for in each dimension of time associated with WIL experiences.

To further the discussion about the PTIM-WIL, it is important to consider what this model might look like in application. Considering how the WIL stakeholders in the relationship circle of the model have responsibility for being proactive in trauma-informed practices, a scheme for where these practices come into play over each dimension of time in the outer circle of the model could be developed. Table 3 depicts the dimensions of time in the left-hand column and the four actors marking the vertical columns to the right. In this table, the kinds of questions the actors might raise to support a trauma-informed stance during these time periods in a WIL experience are noted and illustrate how these relationships can be considered for proactive planning in practice. A table like this could be created from other elements of the model as well. For example, instead of focusing on the time periods and relationships, a table focusing on WIL support spaces and relationships or a table about WIL supports during the periods of time could be constructed. In each of these constructions, the cross-cutting elements of the trauma framework should be embedded in the trauma-informed practice. Also of note is that tables such as these can be misleading to some degree because they isolate the actors rather than creating interconnectedness. As a tool for guiding practice, however, examining these kinds of relationships between elements of the models should give some insight about how to attend to trauma-informed practices across the four dimensions of the proximity model.

TABLE 3: Application of the PTIM-WIL in practice.

Time	Student	Peer community	HEI	Workplace
Prepare for WIL	What support will I need in the workplace to ensure I am not retraumatized given my personal experience with trauma and how do I know where that support is located?	How can we plan ahead for ensuring that we can meet up to support each other during our workplace learning experience?	How have we helped empower students to be proactive in the workplace learning environment so that they can protect themselves from or manage through traumatization or secondary trauma?	How have we prepared our mentors for WIL students to be aware of signs and symptoms of trauma that the students may evidence (as individuals and as members of a cohort who may have a shared trauma history)?
Enter WIL	Do I know what the workplace will provide for me to keep me safe from a cultural, historic, or gender perspective?	Can we set up a network to share how we are planning to prepare for our first days in the workplace learning environment?	How will we check with students soon after their entry into the workplace to learn if they need any additional wellbeing or safety support?	Does our planned induction processes have information for the students about how to access resources (e.g., quiet rooms, counselling) while they are here in the workplace?
Engage in WIL	What do I do if I encounter a new trauma or traumatization while in the workplace?	Are there workplace committees, support groups, affinity groups, or peer groups that I can join	What resources or personnel do students have access to while in their placement in case they experience	How do we engage WIL students in coaching and learning about how to manage the stress and possible

	(Who do I talk to if I need time off? Do I feel safe with the workplace and HEI reporting processes if I need to use them?)	to support myself and actively engage in supporting others?	new trauma or traumatization? (Who do they call? What services are immediately available in a time of crisis?)	vicarious trauma they may experience in the workplace?
Exit WIL	What is the process for exiting the workplace in a way that does not create a sudden void in my life and keeps me professionally safe (e.g., managing the personal and professional relationships that have been created)?	How are the HEI and workplace peer communities engaged in the disengagement process in an inclusive and supportive way?	Have we given the students the tools they need to disengage from the workplace experience in a safe and supportive way?	How have we planned for the end of the WIL experience so that we are celebrating and recognizing the students' accomplishments to support their wellbeing?
Follow-up from WIL	How do I evaluate my own WIL experience in terms of what I have learned about my own wellbeing and resilience and what I have learned about this work environment?	What opportunities do we have in peer groups to debrief the WIL experience and make sense of the individual and collective experiences we have had?	How are we, as the HEI, inclusive of student voice in evaluating and gaining feedback about their WIL experience?	How are we, as the WIL workplace, inclusive of student voice in evaluating and gaining feedback about their WIL experience?
Future Learning Based in WIL	What are the learnings I will take with me into the future and how will I continue to learn to manage my own wellbeing and trauma experience?	What have I learned about the kinds of peer interactions and supports that I want to be a part of for my own wellbeing and to support others?	What is the continuous improvement opportunity for WIL experiences that will keep our students safe, empowered, and engaged?	What workplace conditions will be continuously improved to support students while in a WIL placement so that they are safe, included, and empowered?

CONCLUSION

WIL is perhaps the last haven for students in HEIs to apply their learning in an authentic workplace before they become fully accountable as employees and practitioners. Trauma experiences are pervasive within and across societies. Under many instances of WIL, traumatic experiences connect educators in HEIs, students and the communities their professional disciplines serve. In the current study, the PTIM-WIL model is proposed by reimagining and locating the intersections of the WIL wellbeing model (Konstantinou et al., 2023) and the SAMHSA (2014) trauma supporting framework to incorporate the idea of proximity across time, space, and relationships. The PTIM-WIL model is both comprehensive and practical. The collective knowledge of trauma, WIL and trauma-informed pedagogy is consolidated with the authors' observations and reflections when working at the University of Canterbury in Christchurch. In addition, conversations had with University of Canterbury WIL stakeholders have been related and reflected.

In concluding the paper, key points that deeply resonate with the authors' own experiences are highlighted. First, programs and intentional initiatives that foster peer interaction and the sharing of lived experiences are critical as peer support forms the foundation for genuine collaborations and shared decision-making within WIL. Addressing trauma experiences in WIL should not be an individual endeavor but rather a collective effort as a community focused on constructing safety, trustworthiness, and resilience.

Second, the PTIM-WIL model is well-suited for an institutional approach. As a collective of academic and professional staff from various WIL disciplines, common concerns and best practices in formulating this model have been shared. Therefore, this paper proposes that this model functions most effectively as an institutional and collaborative approach for ongoing interdisciplinary collaborations in both practice and research. An institutional approach, far from being top-down, necessitates substantial support through resource allocation, accountability measures, breaking down silos, and fostering WIL communities and a culture of care for both students and staff.

Third, akin to other models, the PTIM-WIL places students at the center, empowering them as future practitioners. Trauma-informed pedagogy aims to cultivate trauma-resilient practices by amplifying student voices and assisting them in discovering their strengths through meaningful connections. The wellbeing and resilience of WIL students are crucial for building resilient communities globally over the long term.

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About the Journal

The International Journal of Work-Integrated Learning (IJWIL) publishes double-blind peer-reviewed original research and topical issues related to Work-Integrated Learning (WIL). IJWIL first published in 2000 under the name of Asia-Pacific Journal of Cooperative Education (APJCE).

In this Journal, WIL is defined as:

An educational approach involving three parties – the student, educational institution, and an external stakeholder – consisting of authentic work-focused experiences as an intentional component of the curriculum. Students learn through active engagement in purposeful work tasks, which enable the integration of theory with meaningful practice that is relevant to the students' discipline of study and/or professional development (Zegwaard et al., 2023, p. 38).*

Examples of practice include off-campus workplace immersion activities such as work placements, internships, practicum, service learning, and cooperative education (co-op), and on-campus activities such as work-related projects/competitions, entrepreneurship, student-led enterprise, student consultancies, etc. WIL is related to, and overlaps with, the fields of experiential learning, work-based learning, and vocational education and training.

The Journal's aim is to enable specialists working in WIL to disseminate research findings and share knowledge to the benefit of institutions, students, WIL practitioners, curricular designers, and researchers. The Journal encourages quality research and explorative critical discussion that leads to the advancement of quality practices, development of further understanding of WIL, and promote further research.

The Journal is financially supported by the Work-Integrated Learning New Zealand (WILNZ; www.wilnz.nz), and the University of Waikato, New Zealand.

Types of Manuscripts Sought by the Journal

Types of manuscripts sought by IJWIL is primarily in two forms: 1) *research publications* describing research into aspects of work-integrated learning and, 2) *topical discussion* articles that review relevant literature and provide critical explorative discussion around a topical issue. The journal will, on occasions, consider good practice submissions.

Research publications should contain; an introduction that describes relevant literature and sets the context of the inquiry. A detailed description and justification for the methodology employed. A description of the research findings - tabulated as appropriate, a discussion of the importance of the findings including their significance to current established literature, implications for practitioners and researchers, whilst remaining mindful of the limitations of the data, and a conclusion preferably including suggestions for further research.

Topical discussion articles should contain a clear statement of the topic or issue under discussion, reference to relevant literature, critical and scholarly discussion on the importance of the issues, critical insights to how to advance the issue further, and implications for other researchers and practitioners.

Good practice and program description papers. On occasions, the Journal seeks manuscripts describing a practice of WIL as an example of good practice, however, only if it presents a particularly unique or innovative practice or it was situated in an unusual context. There must be a clear contribution of new knowledge to the established literature. Manuscripts describing what is essentially 'typical', 'common' or 'known' practices will be encouraged to rewrite the focus of the manuscript to a significant educational issue or will be encouraged to publish their work via another avenue that seeks such content.

By negotiation with the Editor-in-Chief, the Journal also accepts a small number of *Book Reviews* of relevant and recently published books.

Reference

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