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SUPPORTING THE MENTAL HEALTH OF PEER SUPPORT WORKERS FOLLOWING A LETHAL SHOOTING ON CAMPUS

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Abstract

The ongoing youth mental health crisis and shortage of campus mental health clinicians have prompted investment in developing a peer support workforce in universities. The current study seeks to better understand the needs of this vulnerable, front-line workforce when they must both support their peers and care for themselves in times of crisis. The current study is an exploratory longitudinal investigation into the functioning of peer support workers at The University of Virginia before and after a shooting killed three students on campus in November of 2022. Peer support workers (N=42) and a comparison group of students (N=104) completed survey measures of mental health, connection, and other functioning, as well as open-ended reflections, in September and December 2022 (the shooting occurred November 2022). No significant changes in mental health were identified, and peer support workers' open-ended reflections did not contain any direct mention of the shooting or experiences supporting peers after the shooting. One relevant theme arose, reflecting on disruptions to the typical meeting schedule interrupting group progress. Results are interpreted as reflective of student resilience and the importance of prioritizing collective healing following violence on campus.

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Serving as a peer support worker has been proposed as a protective factor for college student mental health, with peer support workers demonstrating mental health gains similar to those demonstrated by their intervention recipients (Hutchinson et al., 2006; Weiner et al., 1974). However, it is an unfortunate reality that many college students are exposed to unexpected and traumatic events on campus during their college experience—one study estimates approximately two thirds (64%) of undergraduate students were exposed to one traumatic event in college (Walters et al., 2024). Given the ubiquity and unpredictability of such events, it is not well-studied how exposure to campus traumas impacts the students who may be vulnerable to both primary and secondary traumas: student support workers. As peer support workers are increasingly deployed in US colleges and universities, understanding the impact of campus traumas on them will be key to sustainably support these first-line mental health prevention and intervention providers. Therefore, the current study examines change in reported well-being for peer support workers facilitating a twelve-session peer belongingness intervention during the Fall 2022 semester at The University of Virginia, when a shooting on campus killed three undergraduate students (Archie et al., 2022).

The well-established Helper-Therapy Principle emphasizes that providing support to others is directly and indirectly therapeutic for the individual dispensing support (Reissman, 1965). Providing structured intervention support to peers has been identified time and again as associated with better mental, physical, and social outcomes for the intervention deliverer (Reissman, 1965, 1990; Scannell, 2021). Several mechanisms underlying these associations have been proposed; for instance, peer support program facilitators may experience feelings of appreciation and/or an enhanced sense of confidence and self-esteem for their contributions (Repper, 2011; Salzer & Shear, 2002). In the case of university students, facilitat-

ing peer support may allow them to connect with other students while providing support, ultimately facilitating their sense of belonging in the school (Baumeister & Leary, 1995; Moeller et al., 2020). The combination of a leadership position, visible contribution to others, and social benefits might ultimately position college peer support workers to reap gains over and above those of the intervention that they administer (Repper, 2011; Scannell, 2021; Weiner et al., 1974).

Of course, these benefits are accompanied by a clear degree of responsibility that students must manage appropriately to do their job. Generally speaking, college students rise to the challenge of becoming knowledgeable and empathetic peer supporters, and individual growth happens most readily when students are safely pushed beyond their comfort zone (Kayes, 2025). This process is scaffolded for most peer support work through adequate training, supervision, and continuing education for students throughout their time facilitating interventions (Fogelson et al., 2022). This can easily become complicated when peer support workers are asked to continue to provide support regarding traumatic campus events that affect them as well as the students that they serve in equal or greater measure. Other relevant work has highlighted the iatrogenic effects of mandated trauma processing for affected individuals immediately following traumatic events (Bryan et al., 2016). Despite the clear therapeutic benefits of providing peer support, if students are expected to provide support to their peers without having managed their own response to a trauma, it is possible that this could have a similar detrimental effect on their well-being. Therefore, it is necessary to understand the vulnerabilities of peer support workers, and how to support the support workers, given that universities may lean on them to administer widespread support to other students.

Furthermore, college peer support workers may experience differential vulnerability based on their identities and the university context. The current study is conducted at a medium-sized, pri-

marily White institution, an environment which is inherently more stressful for students who hold minoritized and marginalized racial identities, due to the chronic exposure to explicit and implicit prejudice and identity-based aggressions (Mitchell, 2018). As a result, rates of mental health symptoms are systematically higher among minoritized students at a primarily white university (DeBate et al., 2024). It is unclear the degree to which identity stress may intersect with the stress of providing peer support following traumatic events, and thus, the current study considers participant demographic characteristics as a potential moderator of mental health symptom changes across the semester.

The current study leverages an investigation into changes in peer support worker well-being associated with administering a belongingness intervention when a school shooting occurred on campus. The study is inherently exploratory, as it was already ongoing when the event occurred. The study uses self-report survey data and open-ended facilitator reflections in the pursuit of the following research aims:

1. Characterize changes in peer support worker well-being across the semester, in comparison to a group of students at the university who did not serve as peer support workers during the same semester.
2. Describe themes that emerge in the reflections of undergraduate student peer support workers regarding their semester facilitating a belongingness intervention.

Methods

Student peer support workers (N=42) were recruited from the pool of intervention facilitators; comparison group students (N=104) were recruited from a research participant pool. Students responded to surveys online via Qualtrics in September and December 2022, regarding mental health symptoms, sense of belonging, emotional well-being, personality characteristics, demo-

graphic identities, and in-group experience. Student facilitators also responded to open-ended questions regarding their experience facilitating the intervention. Between a large slate of quantitative well-being measures and qualitative responses included to reflect the facilitators' own voices in the data, the study design aimed to collect a well-rounded sample of facilitator data to paint a complete picture of their facilitation experience. All students completed consent forms and were entered into a compensation raffle for each completed survey.

The Intervention

The Connection Project was created to build prosocial relationships and reduce the risks of social isolation among student peers and has been shown to increase student belongingness and decrease sense of loneliness and depressive symptoms (for full intervention procedures, see Costello et al., 2022). The intervention consists of groups of eight to twelve students who meet weekly for one-hour sessions over twelve weeks led by fellow undergraduate students who have spent a semester training and learning about the curriculum. The intervention provides both a theoretical understanding and experience of the benefits associated with engaging in supportive peer relationships. Participants are guided through exercises that vary from week to week, including group discussions and paired skills-building activities that give student facilitators a range of tools to facilitate connection in their groups (Allen et al., 2020; Costello et al., 2022).

Facilitator Training

Undergraduate facilitators are trained through a semester-long, twelve-week course that provides both practical experiences with the belongingness intervention curriculum and the theory behind it. They spend their first five weeks meeting twice a week in groups of eight to twelve to simulate the experience of participating in one of the intervention groups that they will lead the

following semester. The following seven weeks include a survey of the research base for the importance of belongingness as well as each of the micro-interventions they are preparing to lead. During their semester of facilitation, students attend weekly in-person supervision meetings with a supervisor and four other pairs of active facilitators to address unexpected issues in their groups, reflect on how the research base they've studied has manifested in the group, and to continue the training process in real time (Costello et al., 2022). Supervision groups give undergraduate students a rare opportunity to experience implementing a psychological intervention with regular support from graduate and Ph.D.-level supervisors.

The Connection Project Intervention

The Connection Project was created to capitalize on young people's desire for social connections through a group-based curriculum designed to build prosocial relationships and reduce the risks of social isolation (Allen et al., 2020; Costello et al., 2022; Nagel, 2020). The Connection Project provides both a theoretical understanding and experience of the benefits associated with engaging in supportive peer relationships. The group curriculum consists of single- and multi-session interventions that have undergone empirical testing and shown moderate-to-large effect sizes in rapidly and sustainably improving outcomes in well-being and belongingness measures for young adults. Participants are guided through exercises that vary from week to week, including group discussions and paired skills-building activities that give student facilitators a range of tools to facilitate connection in their groups (Allen et al., 2020; Costello et al., 2022; Nagel, 2020).

The many micro-interventions that combine to make up the whole of students' experience in The Connection Project are grounded in four mechanisms with empirical evidence for facilitating connection, a sense of belongingness, and positive health outcomes for participants. Those four mechanisms include values affirmation (Arkowitz

et al., 2015; Cohen & Sherman, 2014), social belonging (Furrer & Skinner, 2003), helper therapy (Allen et al., 1997; Yeager & Walton, 2011), and narratives of connection (Pennebaker, 1997). Student facilitators utilize these mechanisms to shape a semester-long experience for their group members, which has demonstrated a significant increase in both observed and experienced peer relationships, an increase in academic engagement, and a decrease in depressive symptoms (Allen et al., 2020).

The Connection Project aims to buffer against mental health risks by fostering emotional vulnerability through meaningful connection through a peer support model that differs from the resources provided by college counseling centers by giving students the tools to personally impact their communities' mental health. This aligns with findings that college students with strong emotional regulation on campuses where shootings occur experience less prolonged distress than their peers who lack those regulatory abilities, buffering campus mental health resources before community-wide traumas occur (Orcutt et al., 2014).

Recruitment

Students were recruited to participate as facilitators before the start of this study through existing channels of extra-curricular recruitment used by university clubs and activities, including flier posting, interest meetings, email announcements, contact with Housing and Residence Life staff, and recommendation by the Office of Student Affairs. Students were invited to join the facilitator training course following a brief application and interview with the course instructors. At the start of this study, facilitators who were registered for the Fall 2022 semester were offered entry to a raffle drawing for gift cards as compensation for study participation. Comparison group participants were recruited from a sample of students participating in research studies for credit, primarily as a requirement for psychology courses that they were enrolled in. Comparison group participants were

not involved with the intervention program in any way (i.e., as either a current or past participant or facilitator). Students over the age of 18 provided informed consent online. No students under the age of 18 enrolled in the study, so parental consent was not sought for this sample.

Measures

Depression. The Beck Depression Inventory (BDI; Beck & Steer, 1987) is one of the most widely accepted instruments for detecting possible depression in non-clinical populations (Steer et al., 1985), with demonstrated reliability and concurrent validity (Jolly et al., 1994). For this measure, cutoff scores were derived from analyses of the original BDI and clinical ratings of depression: 0-9 (*normal or asymptomatic*); 10-18 (mild to moderate depression); 19-29 (*moderate-severe depression*); and 30-63 (*extremely severe depression*; Beck & Steer, 1987).

Impostor Syndrome. To assess impostor syndrome in this sample, the Perceived Fraudulence Scale (PFS) was administered. The PFS purports to assess the degree to which one perceives oneself as an impostor or a phony. Subjects rated each of the 51 items (e.g., “I sometimes feel there’s something false or misleading about me that others don’t notice;” “My private feelings about, and perception of, myself sometimes conflict with the impressions I give others through my public actions or behaviors;” and “In some situations I feel like an impostor”) on a 7-point scale ranging from 1 (*strongly disagree*) to 7 (*strongly agree*). The developers of the scale reported internal reliability of .90 and found perceived fraudulence to be substantially discriminable from depression, social-evaluative anxiety, and self-monitoring (Kolligian & Sternberg, 1991).

Intergroup Anxiety. Intergroup Anxiety was assessed with a 12-item measure (Stephan & Stephan, 1985), slightly adapted for adolescents, and linked to measures of prejudice and intergroup relations (Davies et al., 2011). Each item begins, “When interacting with people who are

not from my racial/ethnic group, I feel...” with prompts ranging from “threatened” to “at ease” and participants noting the degree to which they feel each emotion. Students respond to items on a seven-point Likert scale where 1 = *Not at all* and 7 = *Very much*. Positively phrased items are reverse-scored and then all items are summed, such that higher scores on this scale indicate greater intergroup anxiety.

Loneliness. The UCLA Loneliness Scale is a 20-item measurer that assesses subjective feelings of loneliness and social isolation using responses on a 4-point Likert-scale (Russell et al., 1978). Scores are predicted by lack of social involvement and linked to outcomes ranging from lower life satisfaction to attachment insecurity (Goswick & Jones, 1982; Kobak & Sceery, 1988; Moore & Schultz, 1983).

Personality Factors. At study start, the Ten-Item Personality Inventory was administered to assess the Big Five factors of personality: openness, conscientiousness, extraversion, agreeableness, and neuroticism (Gosling et al., 2003). Items were phrased as, “I see myself as...” “...extraverted,” “...enthusiastic,” etc. Students responded to two items per personality factor, on a Likert scale where 1 = *Disagree strongly*, 4 = *Neither disagree nor agree*, and 7 = *Agree strongly*. Items were summed so that greater scores indicate greater presence of the relevant personality factor.

University Attachment. The University Attachment Scale assesses the degree to which students feel connected to their university. Students respond to nine items that assess these school-related feelings on a 5-point Likert scale tailored to the stem of each question. For example, students respond to “How accurate would it be to describe you as a typical University of Virginia student”? on the scale of 1 = *Not at all accurate* to 5 = *Extremely accurate* (France et al., 2010).

Open-Ended Facilitator Reflections

Peer support workers responded to the following open-ended questions in December 2022:

1. How close do you think your group got this semester? Please describe.
2. What do you think went well for your group?
3. What do you think was challenging for your group?
4. Please describe your group. What are their strengths? What do you wish you could add or change?

Thematic Summary Approach

To summarize the themes generated by peer support workers' open-ended responses, the study team undertook a process of qualitative analysis, which involved:

1. A holistic scan of responses to identify emerging themes
2. Categorization of individual responses to those recurring themes
3. Breakdown of individual responses to include multiple categorizations (e.g., noting the interruption in typical curriculum flow and talking about their participants' experiences outside the group)
4. Selection of the most repeated and significant themes

The coded qualitative findings are presented in the results section below with each theme identified in the facilitator follow-up survey presented along with the statements that were grouped under them. For example, the statements "some of them hang out outside of group" and "I am happy with how much they hang out outside of class" were responses to the survey question "How close do you think your Connection Project Group got this semester?" which were coded as consistent with the theme "Evaluating success based on participants spending time together outside meetings." This method of presenting data was selected to illustrate the similarities between facilitators' responses and to demonstrate how each thematic category was derived.

Other potential methods of presenting the data were considered and determined to be ill-fit-

ting for the size of the sample and our coding structure. Presenting these thematic categorizations as percentages of the full qualitative sample would have made it difficult to draw big-picture conclusions. Making a quantitative comparison between the total number of responses coded under a specific theme and the total number of responses in the sample would compare conceptually unrelated thematic categories to one another and would create an inflated denominator of the entire sample of facilitator responses, yielding a less meaningful interpretation.

We also considered examining the frequency that each theme appears under each individual prompt, which is a common approach in categorizing qualitative results of this nature. However, the thematic codes are spread evenly enough and are occurring in a small enough sample of respondents that breaking down the analysis to that level would have yielded an uninformative analysis as well. Rather, in the context of this small pool of facilitators who are reflecting on similar thematic takeaways from their experiences, we conduct our qualitative analysis by examining how these common themes emerged through individual responses rather than a conversion to quantitative measures of thematic frequency (Braun & Clarke, 2006; Miles et al., 2014; Nagel, 2020). We undertook this rigorous process of considering multiple possible approaches to evaluating our mixed-methods data, particularly in the context of an unforeseen community trauma influencing the data, with a focus on participatory and advocacy criteria (Creswell & Clark, 2011).

Sample Attrition

Of the 146 students that participated in the pre-intervention assessment, 92 (63.01%) also participated in the post-intervention assessment. Participants who dropped out of the study endorsed less university attachment ($M_{\text{Dropped}} = 26.16$, $M_{\text{NotDropped}} = 33.06$, $t = -2.37$, $p < .05$) and less baseline conscientiousness ($M_{\text{Dropped}} = 10.72$, $M_{\text{NotDropped}} = 11.67$, $t = -2.51$, $p < .05$) than participants who

did not drop out of the study. Dropped-out participants did not differ on any demographic variables (gender, year in school, minoritized racial/ethnic status); facilitator vs. comparison group status; or baseline depression or intergroup anxiety. Full information maximum likelihood methods were used to handle missing data in all regression analyses, in order to reduce any potential distortion and increase generalizability (Arbuckle, 1996). All analyses control for student gender (such that 0 = *Man* and 1 = *Woman*) and minoritized racial status (coded such that 0 = *White* and 1 = *Minoritized racial identity*).

Quantitative Analytic Plan

SAS PROC CALIS (Version 9.4; SAS Institute, Cary, NC) was used to assess key relations in hierarchical regression models. Five models in total, one for each variable, were constructed. Each model specified that student outcome scores on the construct-of-interest (belongingness, depression, impostor syndrome, intergroup anxiety, and loneliness) were a function of student demographic characteristics (gender, school year, minoritized racial status), the baseline scores on those measures (to investigate relative change), and facilitator status (0=comparison group, 1=facilitator). This allowed interpretations of the degree that facilitation status was predictive of relative change scores across the semester, after accounting for potential demographic covariates. Full-information maximum likelihood methods were used to handle missing data. All variables were standardized prior to analysis. *Post-hoc* analyses investigated potential moderation by demographic characteristics by incorporating an additional interaction term between facilitator status and demographic characteristic.

Results

Preliminary Analysis: Characteristics of Peer Support Workers and Comparison Group

The current study sampled students from a medium-sized public university in the Eastern United States. Sample demographics and comparisons of Facilitator and Comparison Groups are presented in Table 1.

Some differences were identified between the facilitator and comparison groups, including that the facilitator group was relatively “older” in terms of year in college ($M_{\text{facilitators}} = 3.62$, $M_{\text{comparison}} = 1.83$, $p < .001$), demonstrated less baseline intergroup anxiety ($M_{\text{facilitators}} = 13.26$, $M_{\text{comparison}} = 17.05$, $p < .001$), and endorsed less university attachment than comparison group students ($M_{\text{facilitators}} = 22.75$, $M_{\text{comparison}} = 29.19$, $p < .01$). Facilitators also endorsed greater openness ($M_{\text{facilitators}} = 10.79$, $M_{\text{comparison}} = 9.46$, $p < .01$) and extraversion ($M_{\text{facilitators}} = 9.33$, $M_{\text{comparison}} = 7.74$, $p < .01$) than comparison group students. Groups did not differ on demographic characteristics (gender, racial, or sexual orientation identities) or baseline endorsement of any other well-being or personality variables assessed.

Primary Quantitative Analyses

Aim 1. Characterize changes in peer support worker well-being across the semester, in comparison to a group of students at the university who did not serve as peer support workers during the same semester.

We tested the direct effects of facilitator status on development across the semester and observed no significant changes in all measures of well-being (belongingness, depression, loneliness, impostor syndrome, or intergroup anxiety) after controlling for gender, minoritized racial identity status, and student year in school (see Table 2).

Post-hoc analyses explored moderation by gender and minoritized racial identity status. No significant interactions arose between gender or minoritized racial status and facilitator status to predict differences in any measure of well-being (belongingness, depression, loneliness, impostor syndrome, or intergroup anxiety; see Table 3).

Aim 2. Describe relevant themes that emerged in the reflections of undergraduate student peer support workers regarding their semester facilitating a belongingness intervention.

Peer support workers' responses to open-ended questions yielded one primary theme relevant to the school shooting: facilitators reported feeling affected by the significant and unusual gap between sessions that occurred as a result of the shooting (see Table 4 for all participant responses coded as relevant to this theme). Facilitators stated comments such as "due to gaps in the semester and the large size of our group, it seemed we didn't achieve super close connection until the end of the semester," and "I had a lot of hope for where the group could go; I wish we had more time but that's ok." Their language consistently references "interruption," "unavoidable breaks," and a desire for "more time." There is a dominant understanding throughout these reflections that it was difficult to lose in-person connection with their group members for one week in the midst of what are typically some of the most vulnerable and connecting sessions in the curriculum (Costello et al., 2022), but that the connections and final meetings they were able to hold retained significant meaning.

Two additional themes arose in the responses, including 1) evaluating group progress by the informal metric of how often group members spent time together outside of sessions and 2) the role of shared laughter as a facilitator of connectedness (see Supplemental Discussion, Supplemental Tables 2, 3).

Discussion

In sum, peer support workers demonstrated no differences in mental health changes from the comparison group during the Fall 2022 semester, when a shooting occurred on campus. Facilitators' open-ended responses yielded three themes: facilitators reflected on their self-derived goal to promote group bonding outside of the group session

time, the interruption to their facilitation curriculum and process, and the value of laughter in their groups throughout the semester. Each of these findings is discussed, in turn, below.

Based on previous research describing college students' response to gun violence on campus, we could reasonably expect students to report downturns in mental health, distrust in other students, or a drive to become more solitary and less open to social connection shortly after a school shooting (Reffi et al., 2022). The current study found no evidence of significant changes in mental health functioning among this sample of facilitators or comparison group students. There was also no evidence of moderation by demographic characteristics. This program has demonstrated a stronger boost to student participants who hold minoritized identities in past studies (Costello et al., 2022). College students at predominantly White institutions who belong to racial or ethnic minority groups tend to experience higher rates of depression than their peers, while negative perception of their university environment and its treatment of minority students correlates strongly to an even greater risk for depression within those minority stress models (Clark & Mitchell, 2018; Wei et al., 2010; Wei et al., 2011). It would not have been particularly surprising to see these patterns exacerbated by the shooting in Fall 2022, given that the perpetrator and several of the victims were Black male students. Facilitators were exposed not only to their own stress reaction to witnessing the death of several Black men, but also then served in a peer support role for other students who shared their own stress reactions. Therefore, although we cannot interpret null findings, it is promising that we find no indication that minoritized facilitators fared significantly worse than White facilitators. Of course, it is a notable limitation that we cannot parse the experience of Black student facilitators, in particular.

The qualitative portion of our data provided a more personal view into how undergraduate facilitators reflected on their experience of the Fall

2022 semester. The shooting occurred in the evening on Sunday November 13, 2022. Classes were cancelled November 14 and 15, and classes met but were ungraded November 16-18, to support students' emotional healing following the shooting (McKenzie, 2022). To sufficiently support facilitators in delivering a processing and coping session, The Connection Project groups did not meet the week of November 14. Group meetings were replaced by augmented training and additional, informal mental health check-ins for facilitators. Following return to the groups, before re-entering the typical curriculum schedule, facilitators led an additional session focused on coping with stress and discussing emotional reactions to the shooting and the university's response to the shooting. The study team felt that the break in sessions may be particularly important for students to re-engage safely with the group, because groups were near the end of the curriculum when session content is focused on structured vulnerability and building connections supporting one another through challenges. Given that the interruption was due to a traumatic event and at a pivotal time in the intervention curriculum, it is not particularly surprising that facilitators collectively emphasized the disruption to group meetings as impactful.

Despite students indirectly referencing the challenging lapse in sessions, only one facilitator mentioned the shooting explicitly in any of the responses (they felt that connection with their group was "limited by unavoidable breaks at the end of the semester with fall break + election day + shooting that gave a big gap in the most important part of curriculum"). It is possible that some students may be reticent to report out about the shooting when not directly prompted to discuss it. This could be a result of perceived pressures not to talk about the shooting, a product of the processing and guidance that they had received from their clinician supervisors, or facilitators' own maintenance of protective boundaries. Unfortunately, we cannot know for sure exactly how much each facilitator discussed the shooting with their group or

how it factored into their process of facilitating the intervention throughout the remaining two weeks of the intervention.

Implications for Student Affairs

There is a strong research base to support the importance of social support and community belongingness as buffers to the posttraumatic impacts of mass shootings on college campuses, as well as other mass traumatic events. Key factors for posttraumatic growth and recovery on college campuses following campus shootings include: experiencing meaningful relationships that involve being both the receiver and giver of compassionate support, the ability to flexibly move between multiple coping behaviors, and seeking out strong social bonds that facilitate meaning-making (Galatzer-Levy et al., 2012; Orcutt et al., 2014; Tingey et al., 2017). As the mental health crisis on college campuses persists, the positive impact of practicing as a peer support worker presents a significant response to the negative impact of unpredictable community traumas.

Immediately following the shooting on campus, the research team and peer support workers collaboratively decided to move forward with extra supervision and support, including scaffolded identification of boundaries-of-care, coping strategies, and empathic support for peer support worker distress. An additional group session was added to the curriculum following the shooting, in order to provide students an opportunity to meet and connect with one another, express emotions in a safe space, and re-engage with the group gradually, rather than returning to a curriculum that asks students to intentionally be vulnerable at a time when that may have felt too intense for some students. It is now relatively common that we incorporate one "flex" week into our intervention curriculum in order to accommodate unanticipated needs of a group—for example, allowing for additional processing time following the shooting or to aid in the transition from in person to online administration in response to the COVID-19 pan-

demic (Costello et al., 2020).

The peer support workers were supervised by doctoral-level clinical psychologists and clinical psychology doctoral students, who were equipped with the training to advise peer support workers how to support their fellow students (for example, clinicians made it explicitly clear they were not expected to treat participants or get them to process intense emotions), as well as to provide brief psychological first-aid directly to the peer support workers in both individual and group settings. Additionally, the Primary Investigator hosted a gathering for the facilitators in his home to offer them unstructured time to gather as a whole group with all the facilitators, supervisors, and study staff. Although it is unclear the degree to which this additional supportive and clinical attention influenced the outcomes described in this study, it stands that the data collected in this study reveals a cohort of resilient peer support workers who were more than capable of helping their community heal by applying social support skills and creating one of the first spaces for closeness and camaraderie that many of their peers experienced post-shooting. It remains true that we must not underestimate our peer support workers as we maintain an open dialogue about their own well-being in response to traumas on campus.

Limitations and Future Directions

The reality of studying student responses to community violence is that we will never be able to conduct a traditional pre and post-test quantitative analysis of their well-being because of the unpredictable nature of these events. The current study is imperfect, and we acknowledge that many other variables likely influence the variables investigated here. The convenience sample leads to limitations in the generalizability of these findings, and other studies will be needed to disentangle the role of students' identities in shaping their resilience to trauma while in helping roles in different contexts. Additionally, given limitations on power due to small sample sizes of any given individual

identity group, we are unable to speak to differences by particular minoritized racial or gender identity group. It is critical that future work expand sample sizes and investigate the experiences of the many intersectional identities that students hold. Furthermore, due to the sudden nature of the shooting on campus, we were unable to ask explicitly about peer support workers' responses to the shooting and interruption to their groups. These limitations notwithstanding, we are eager to look ahead toward how we might build on these results to improve college health outcomes by leveraging campus resources for buffers to negative outcomes from community trauma. Our quantitative analysis highlighted the importance of implementing supports for minoritized students at predominantly white institutions, particularly in response to violent tragedies that impact their communities. Subsequent research on peer support workers and this program should build on these findings by collecting data from a longer timeframe and by incorporating additional layers of qualitative analysis to deepen our understanding of how this cohort of facilitators, as well as future ones, experience their dual role as a student and a supporter in challenging times on campus.

Conclusion

The current study supports the resilience of undergraduate student peer support workers and the importance of student-led communities as sources of connection, particularly after community-wide trauma. Student affairs offices should consider the mental health of students in supportive roles who might otherwise be vulnerable to mental health symptom risk in their context. The capacity to flexibly support students through both formal (i.e., mental health resources) and informal (i.e., open house meetings, "check ins" with instructors, supportive communication from administration) could stand to have a large impact on the mental health of peer support workers and the student body at large. Future research should continue to

invest in supports for students by expanding our knowledge of the processes that facilitate post-traumatic growth on a community scale through social support interventions. As the current mental health crisis persists and campus mental health resources remain over-taxed, the positive impact of peer support programs presents a significant resource for mental health benefits and a potential buffer to the negative impact of community traumas.

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Table 1. Group Comparisons of Demographics, Baseline Psychological Functioning, and Personality Features

	Facilitators <i>N</i> = 42		Comparison <i>N</i> = 104		Group Comparisons
	<i>N</i>	%	<i>N</i>	%	<i>p</i>
Student Gender	Male: 4	9.5	Male: 22	21.8	.16
	Female: 36	85.7	Female: 77	76.2	
	Non-Bin: 2	4.8	Non-Bin: 1	1.0	
	Other: 0	0.0	Other: 1	1.0	
			Missing: 1		
Student Race/Ethnicity	Black/Afr-Am: 2	4.8	Black/Afr-Am: 4	3.9	.33
	White: 33	78.6	White: 69	68.3	
	Hispanic: 1	2.4	Hispanic: 8	7.9	
	Asian/PacificIs: 6	14.3	Asian/PacificIs: 12	11.9	
	Multi-ethnic: 0	0.0	Multi-ethnic: 7	6.9	
	NativAm: 0	0.0	Declined: 1	1.0	
			Missing: 1		
Student Year	First Year: 0	0.0	First Year: 46	45.5	<.001***
	Second Year: 3	7.1	Second Year: 34	33.7	
	Third Year: 11	26.2	Third Year: 13	12.9	
	Fourth Year: 27	64.3	Fourth Year: 8	7.9	
	Fifth Year: 1	2.4	Fifth Year: 0	0.0	
			Missing: 1		
Sexual Orientation	Asexual: 0	0.0	Asexual: 2	2.0	.73
	Bisexual: 5	11.9	Bisexual: 11	10.9	
	Gay: 0	0.0	Gay: 1	1.0	
	Lesbian: 1	2.4	Lesbian: 0	0.0	
	Queer: 3	7.1	Queer: 2	2.0	
	Questioning: 2	4.8	Questioning: 7	6.9	
	Straight: 7	71.4	Straight: 78	77.2	
	Declined: 1	2.4	Declined: 0	0.0	
			Missing: 1		
Baseline psychological functioning					
	Mean (<i>SD</i>)		Mean (<i>SD</i>)		<i>p</i>
Belongingness	68.21 (10.83)		68.50 (12.04)		.89
Depressive Symptoms	30.13 (8.65)		31.72 (8.50)		.33

Table 1 continued*Group Comparisons of Demographics, Baseline Psychological Functioning, and Personality Features*

Depressive Symptoms	30.13 (8.65)	31.72 (8.50)	.33
Impostor Syndrome	15.13 (6.61)	15.13 (1.06)	.33
Intergroup Anxiety	13.26 (4.41)	17.05 (1.98)	<.001***
Loneliness	40.39 (12.34)	42.21 (12.57)	.43
Baseline personality features			
	Mean (SD)	Mean (SD)	<i>p</i>
Openness	10.79 (2.17)	9.46 (2.21)	.002**
Conscientiousness	11.10 (2.48)	11.12 (2.24)	.88
Extraversion	9.33 (3.17)	7.74 (3.42)	.01**
Agreeableness	10.26 (3.52)	9.73 (2.74)	.33
Neuroticism	7.35 (2.81)	8.37 (2.90)	.06

Table 2*Effects of Facilitator Status on Mental Health Symptoms*

	Symptoms (December 2022)				
	Belongingness	Depression	Impostor Syndrome	Intergroup Anxiety	Loneliness
	B (SE)	B (SE)	B (SE)	B (SE)	B (SE)
Student Gender (0=M; 1=F)	.07 (.17)	.13 (.15)	.07 (.14)	-.04 (.23)	-.18 (.13)
Student School Year	.05 (.11)	-.10 (.10)	-.07 (.11)	.18 (.17)	.06 (.08)
Minoritized Racial Status (0=White; 1=Minoritized)	-.03 (.09)	.01 (.09)	.03 (.08)	.20 (.11)	-.02 (.07)
Baseline Symptom (October 2022)	.73 (.09)***	.79 (.09)***	.80 (.05)***	.44 (.14)**	.77 (.06)***
Facilitating Status (0=Comparison; 1=Facilitator)	.01 (.14)	.17 (.13)	.14 (.13)	.33 (.21)	-.03 (.11)

Note: ** $p < .01$; *** $p < .001$

Table 3***Effects of Facilitator Status*Minoritized Racial Status and Facilitator Status*Gender on Symptoms***

Predicting Symptoms (December 2022) from Facilitator Status*Minoritized Racial Status					
	Belongingness	Depression	Impostor Syndrome	Intergroup Anxiety	Loneliness
	B (SE)	B (SE)	B (SE)	B (SE)	B (SE)
Student Gender (0=M; 1=F)	.06 (.17)	.13 (.14)	.07 (.13)	-.05 (.23)	-.19 (.13)
Student School Year	.06 (.13)	-.11 (.11)	-.08 (.11)	.18 (.17)	.07 (.08)
Minoritized Racial Status (0=White; 1=Minoritized)	-.06 (.10)	.09 (.09)	-.01 (.09)	.17 (.11)	.03 (.08)
Baseline Symptom (October 2022)	.72 (.06)***	.78 (.06)***	.79 (.05)***	.45 (.14)**	.76 (.06)***
Facilitating Status (0=Comparison; 1=Facilitator)	.00 (.14)	.23 (.13)	.11 (.13)	.32 (.21)	.01 (.11)
Minoritized Racial Status*Facilitating Status	-.07 (.10)	.17 (.10)	-.09 (.10)	-.04 (.11)	.12 (.09)

Predicting Symptoms (December 2022) from Facilitator Status*Gender Identity					
	Belongingness	Depression	Impostor Syndrome	Intergroup Anxiety	Loneliness
	B (SE)	B (SE)	B (SE)	B (SE)	B (SE)
Student Gender (0=M; 1=F)	.04 (.16)	.15 (.15)	.09 (.15)	-.02 (.23)	-.18 (.15)
Student School Year	.07 (.11)	-.14 (.12)	-.06 (.10)	.19 (.17)	.07 (.11)
Minoritized Racial Status (0=White; 1=Minoritized)	-.04 (.09)	.03 (.09)	.02 (.09)	.19 (.11)	.08 (.11)
Baseline Symptom (October 2022)	.74 (.09)***	.76 (.15)***	.83 (.09)***	.42 (.15)**	.84 (.04)***
Facilitating Status (0=Comparison; 1=Facilitator)	-.00 (.14)	.18 (.13)	.14 (.13)	.31 (.22)	-.03 (.12)
Student Gender*Facilitating Status	-.21 (.17)	.18 (.15)	.01 (.15)	-.11 (.23)	.07 (.16)

Note: ** $p < .01$; *** $p < .001$

Table 4

Qualitative Responses Included in Theme: Feeling affected by the significant and unusual gap between sessions

In response to Q1: "How close do you think your group got this semester? Please describe"

- moderately close. **due to gaps in the semester and the large size of our group, it seemed we didnt acheive super close connection until the end of the semester.**
 - I am in 2 groups and it's different for both but I think, **especially given the circumstances, we ended up getting close**
 - My group was slow to warm up and **our progress got interrupted with the three week break we ended up having but overall they definitely became closer and began trusting one another.**
 - Very close -- **limited by unavoidable breaks at the end of the semester with fall break + election day + shooting that gave a big gap in the most important part of curriculum**
 - **Close, but we only had 5 weeks. I like everyone a lot**
-

In response to Q3: "What do you think was challenging for your group?"

- **Having the breaks in between i think collided w their willingness to share afterwards**
 - **My first year group took some time to feel comfortable sharing. The breaks did interrupt some of the flow for both.**
-

In response to Q4: "Please describe your group. What are their strengths? What are their challenges?"

- they were very honest, intentional, and vulnerable! they also supported eachother well! **i wish i could have seen them more but obviously the semester was weird**
 - Strengths: Most people are very engaged, **last two sessions have felt more like we were all just hanging out than following the curriculum;** Wish I could change - greater participation from the more quiet members, activities outside of group
 - They are so thoughtful and insightful. **I wish we could have had more time** to just share about our lives and have fun together since they didn't get too engaged with the course discussions. I think they just needed lots of opportunities to break the ice.
 - we were a slow to warm group. they didn't buy in. once we had a conversation about it though, they were able to lean in a little bit more; **i had a lot of hope for where the group could go; i wish we had more time but that's ok**
 - My group was a great mix of people of different backgrounds that were able to find common ground in a lot of ways. We were all extremely supportive of one another and tried our best to make the space feel safe. **I wish I could've added more time to our group meetings so we were able to cover everything we wanted to talk about. But I understand that was more of a logistical issue.**
-

Note: Bolded text emphasizes components of the response that are relevant to the theme of "feeling affected by the significant and unusual gap between sessions"

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