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Date

Vicarious traumatization: latest challenge of Hong Kong Teacher

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### Abstract

In 2019, Hong Kong had outbroken the biggest social movement in half century together with the biggest global pandemic in a century. The stress and distress of student raised to the new high, and teacher is the most reachable resource and support for student. Meanwhile, counselling training is not including in teacher registration requirements. Unequipped teacher expose to traumatized student is suspected to be suffered from vicarious traumatization. The result confirmed that the secondary trauma stress of Hong Kong teacher had reached to a worrying level. Meanwhile, the result also revealed that student trauma encountered could raise the compassion satisfaction of teacher in some of the trauma types if the teacher had received counselling training. The result suggested that counselling training and self-care could help Hong Kong teacher to gain psychological protection and get better prepared for the current and future challenges.

### Introduction

Hong Kong had been suffering from serious unrest situation since June 2019, including political related social movement and global pandemic of fatal virus COVID-19. The consequences were still ongoing and had no sign of end, Hong Kong citizens were being exposed to extreme situation. The probable depression rate raised 5 times higher through the decade (Ni & Yao, et al., 2020), not to mention underaged student who were lack of psychological resource and skills to deal with the related stress, distress and emotion. Teacher were the most reachable help for student, but counselling skill and training were not compulsory in the teacher training programme in Hong Kong. Teacher who encountered with student trauma were suspected to suffered from vicarious traumatization. This research focus on this latest teacher situation which was being ignored and aimed to have a better understand for further study on the correlation between burnout and secondary trauma stress on teacher.

Current crisis of Hong Kong teenagers

According to the data of Hong Kong Police Force from 9<sup>th</sup> June 2019 to 31<sup>st</sup> May 2020 that quoted by news report (“350 人多次被捕”, 2020), 8,986 citizens were arrested, over 3,660 were students, around 1,600 were secondary school students and 8 of them were even primary school students. Almost 40% being prosecuted for riot were students and the youngest one was only 12 (“612 個被控暴動的人 · 6”, 2020), they were all facing the highest sentence for 10 years imprison. These teenagers were under unimaginable pressure, which had not been taken care of by the society and education system.

Meanwhile, only 20% of the arrested were being prosecuted (“6.12 一年”, 2020), and many more were being withdrawn from charge. On the basis of Hong Kong Basic Law Article 87:

Anyone who is lawfully arrested shall have the right to a fair trial by the judicial organs without delay and shall be presumed innocent until convicted by the judicial organs. (Hong Kong Special Administrative Region Government [HKSAR], p. 85)

Arrested students came back to school “as normal” while suffering from a protracted judicial procedural before the final judgement. Although there was no recent related data, it was believed that these legally speaking innocent students would suffer from the same distress and negative mental health of juvenile offenders, including negative mental somatic, anxiety, insomnia, social dysfunction and severe depression (Ireland, Boustead, & Ireland, 2005; Lambie & Randell, 2013). The uncertainty of prosecution was realistic and could not be unsolved. This would lead to pathological worry, anxiety and even depression. (Carleton et al., 2012; Hommel et al., 2003; Khawaja & McMahon, 2011). Latest meta systematic review also indicated that after protests, riots and revolutions, the prevalence of post-traumatic stress disorder and probable major depression both increased (Ni & Kim et al, 2020).

Furthermore, Hong Kong Police Force was being accused of abuse of violence, sexual abuse and inhuman torturing during arrestment and custody, which were violating the convention against torture of United Nations (1984). These brutal actions were being clearly recorded and documented (Hong Kong Democratic Movement 2019, 2020). Latest research revealed the positive links between exposure to police violence, PTSD and depression symptoms (Çelebi, Adam-Troian, & Mahfud, 2020), which could also be observed on the arrested citizens in Hong Kong. They were suffered from various psychiatric distress (Tam, 2019) including post-traumatic stress disorder (“【抗暴之戰】”, 2020) and suicidal behaviour (“Teen protester accuses police of sexual assault”, 2020), which were the same with torture survivors (Basoglu, Jaranson, Mollica, & Kastrup, 2001; Schubert & Punamäki, 2011) and political prisoners (Punamäki et al., 2008).

One the other hand, due to the global pandemic, students were being suspended from school since 3<sup>rd</sup> February 2020. There were increasing reports of domestic violence and conflict among family (“Stuck at home with a monster”, 2020), as well as high level of distress among both parent and children (“【新冠肺炎】”, 2020). Before the resuming of class after four months of suspension, student also suffered from stressors including worrying of academic result and the future arrangement, which had not been taken care. A primary school old girl who aged 10 and a junior secondary school old boy who aged 13 committed suicide before the resuming of school (“Experts urge care”, 2020, June 9).

Mental crisis that mentioned above are just a glance of the current situation. Since the consequences of social movement and pandemic were still unrest, the full picture of the psychological well-being of Hong Kong teenagers was yet to be revealed.

#### Counselling in Hong Kong education system

In Hong Kong, one of the requirements to become a registered teacher was holding a local teacher's certificate or post-graduate diploma/certificate in education (HKSAR

Education Bureau [HKSAR EDB], 2020b). Five universities provided relative qualified courses, but none of them required counselling training (Chinese University of Hong Kong [CUHK], 2020; Hong Kong Baptist University [HKBU], 2020; The Education University of Hong Kong [EdUHK], 2020; The Open University of Hong Kong [OUHK], 2020; The University of Hong Kong [HKU], 2020). There was no data to show the percentage and extent on counselling training and skills of Hong Kong teacher. As this was not a compulsory requirement, teachers' ability and effectiveness on counselling were questionable.

Another issue was about the conflict of cultural traditions and guidance in education between East and West. In Chinese tradition, ethics, intellect, physique, social skills and aesthetics were the five main domains of student's all-round development (HKSAR Education Commission, 2000), and disciplinary procedures were the most common and mainstream method to process moral education. The concept of guidance and counselling were fundamentally different, but there was still no clear definition of counselling in Hong Kong education system (Luk-Fong, 2013). There was no word about counselling and related training in the official explanation of "guidance", the guideline just focused on the administrative work (HKSAR EDB, 2019c) and the duties of discipline master/mistress. (HKSAR EDB, 2019b). According to Education Bureau (2017), all the primary and secondary schools were required to establish a guidance and disciple team to in charge of disciplinary issues. There was another team under the career guidance section which mainly responses for student's career planning (HKSAR EDB, 2019a). Both teams contained the word "guidance", and the corresponding term in Chinese was "輔導", which means "counselling" originally. Thus, the "counselling" in Hong Kong education system was being interpreted as disciplinary guidance and treated as a tool for managing regular student.

The real counselling could only be found under special educational needs [SEN] column (HKSAR EDB, 2014). Although teacher could receive general counselling training

from several local university (Leung, 2003), the self-efficacy in helping students remained low level (Chan, 2008b) and was mainly refer to inclusive classroom (Chao, Forlin, & Ho, 2016). The need of teacher training on counselling regular student was being underestimated.

#### Underrating Hong Kong teachers' vicarious traumatization

Teacher condition was mainly measured in professional burnout (Aboagye et al., 2018; Chan, 2006; Lau, 2002; Lau, Yuen, & Chan, 2005; Schwarzer, Schmitz, & Tang, 2000) by the 3 dimensions of psychological syndrome including emotional exhausted, depersonalization and reduce personal accomplishment, which suggested by Maslach and her team (1986). Stressors of different dimensions, from environmental factors including discipline problems, student motivation, classroom management and school climate etc., to personal factors including coping skills, personality characteristics and demographic data etc., had been widely studied (Chan, 2008a; Chan & Hui, 1995; Grayson & Alvarez, 2008; Lau, Yuen, & Chan, 2005; Mazur & Lynch, 1989; Skaalvik & Skaalvik, 2017; Talmor, Reiter\*, & Feigin, 2005).

Burnout was defined as a cumulative stress from daily setting and environment (Maslach, 1982) and was not the most suitable measurement tool for vicarious traumatization. Since teacher was not a professionally trained counsellor, teacher burnout and self-efficacy were rarely measured by counselling aspect, not to mention about secondary trauma stress which mainly used for examining among psychologist, social workers and other human service professionals (Caringi et al, 2015). Compassion fatigue which contained both burnout and secondary trauma stress elements could be the alternative method. Compassion fatigue was a nature and disruptive by-product of caregiving (Figley, 2013) that first introduced by Joinson (1992) and later modified by Figley. It was also a form of burnout (Figley, 2002) and could target the development of vicarious traumatization symptoms among caregivers better (Potter et al, 2010).

After an individual suffered from trauma, his friend and family were possible to experience the same traumatized symptoms as “secondary victimization” (Munroe et al., 1995), while therapists as “vicarious traumatization” (Paerlamn & Mac Ian, 1995). In Hong Kong, school counsellor, education and clinical psychologist, paediatric psychiatrist and family social worker were seriously insufficient (Ip, 2016, 2017). Encountering with student trauma directly without professional counselling training and self-protection, teachers could only handle by their own sense, and was likely to share the same symptoms of vicarious traumatization as caregivers.

#### Current research gap

There was no current data of Hong Kong student’s psychological well-being. As the researcher himself was a full-time secondary school teacher, by daily observing and accompanying, it was suspected that the psychological distress of students would increase chronically and continuously under current situation. Since suicidal behaviours were contagious (Abrutyn & Mueller, 2014; Robbins & Conroy, 1983; Wong et al, 2005), student who revealed the sign of psychological disorder need to be intervened immediately and properly. However, even in USA, there was only one university offering APA-accredited doctoral programme for school psychology subspecialized in trauma focused (Chafouleas, Johnson, Overstreet & Santos, 2016), the need of professional intervention to trauma in school setting was underestimated. In addition, the latest approach of Hong Kong government remained unchanged that counselling demands were mainly satisfied by outsourcing to non-government organization, social workers or psychologist (HKSAR Labour and Welfare Bureau Task Force on Prevention of Youth Suicides, 2018). Due to lacking related resources (Ip, 2016, 2017), Hong Kong teachers, who were not necessarily trained with counselling skills, were placed at the forefront of handling current crisis. Data of



compassion fatigue that related to counselling could be an effective indicator to reveal the seriousness of the current situation in education system, as well as to Hong Kong herself.

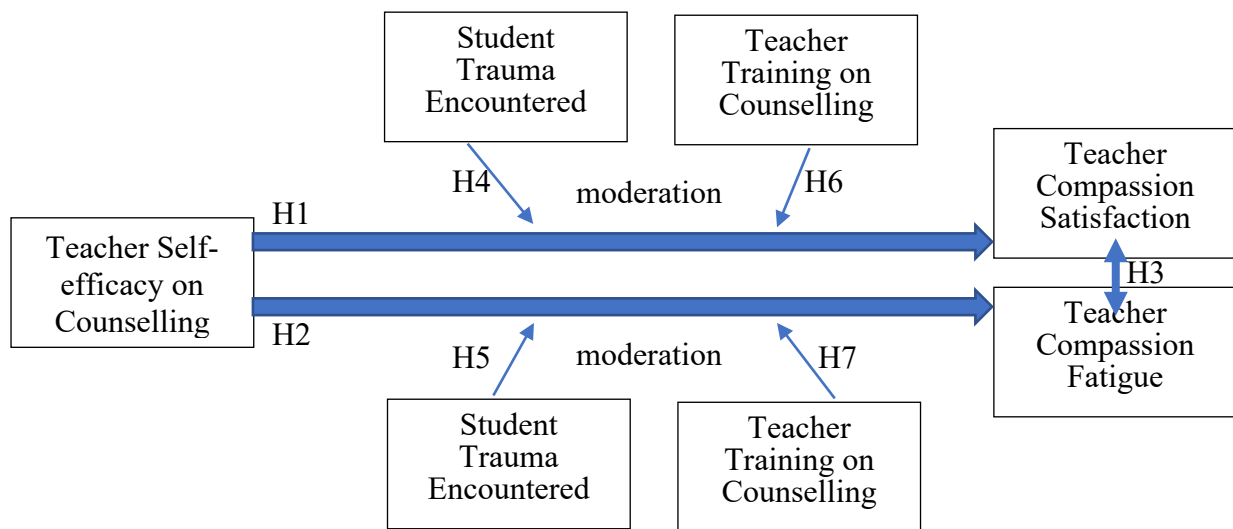
### Hypothesis

Did teachers in Hong Kong generally encountered with student's trauma when they were performing guidance duty? Did student's trauma cause vicarious traumatization on teachers in Hong Kong? Did counselling training and self-efficacy on counselling helped Hong Kong teacher to better handle vicarious traumatization?

The higher self-efficacy, the lower the compassion fatigue and burnout among social worker, school professional counsellor and other caregivers (Bozgeyikli, 2012; Cocker & Joss, 2016; Gunduz, 2012; Prati, Pietrantoni, & Cicognani, 2010), it was hypothesis that (1) teacher self-efficacy on counselling was negatively correlated with compassion fatigue. On the other hand, the higher self-efficacy, the higher satisfaction was predicted (Collie, Shapka, & Perry, 2012; Kao et al., 2020), it was hypothesis that (2) teacher self-efficacy on counselling was positively correlated with compassion satisfaction. Meanwhile, compassion satisfaction might function as the protective factor for compassion fatigue (Barbour, 2019; Milliard, 2020), it was hypothesis that (3) compassion satisfaction negatively correlated with compassion fatigue. Exposing to trauma of others increased the risk of vicarious traumatization (Dunkley & Whelan, 2006; Pearlman & Mac Ian, 1995; Sexton, 1999) and thus led to compassion fatigue (Cocker & Joss, 2016; Figley, 2013; Munroe, 1995), given the current crisis situation and lack of counselling related training, it was hypothesis that (4) student trauma encountered moderated the relationship between teacher self-efficacy on counselling and compassion satisfaction (5) and between teacher self-efficacy on counselling and compassion fatigue. Finally, self-efficacy was positively correlated with training (Havyer, van Ryn, Wilson, & Griffin, 2017; Merriman, 2011, 2015; Slatten, Carson, & Carson, 2011),

and teacher training on counselling was positively related to teacher self-efficacy on counselling (Chan, 2005; Koenig, 2014), and training could be the protect factor and lead to higher compassion satisfaction (Figley, 2002; Neumann & Gamble, 1995), it was hypothesis that (6) teacher training on counselling moderated the relationship between teacher self-efficacy on counselling and compassion satisfaction (7) and between teacher self-efficacy on counselling and compassion fatigue.

Hypothesis Model:



## Methodology

### Design

A cross-sectional survey was used to examine the moderation effect of “student trauma encounter” and “teacher training on counselling” on the relationship between “teacher self-efficacy on counselling” to “teacher compassion satisfaction” and “teacher self-efficacy on counselling” to “teacher compassion fatigue”.

### Participants

In order to fulfil the purpose of understanding the latest situation of Hong Kong teachers, only Cantonese speaking teaching staffs that work at all kinds of Hong Kong secondary school in 19-20 cohort were recruited. Due to the mix-duties of teaching assistant,

including taking care of after school class and special educational needs student, non-teaching teaching assistant were also recruited. Primary school teacher and kindergarten teacher were excluded for the preliminary research. Exclusion criteria also included (i)retired teacher, (ii) non-teaching staff in secondary school setting, and (iii)non-Cantonese speaking teacher. Demographic data like nationality, age and gender were the filtering condition.

A google online survey platform was used to set up the online questionnaire for locating our participants. Colleagues that the researcher was closely associated with as well as social media platforms were used as the medium to identify the potential participants. In order to attract more participants and kept the data closely related social movement plus pandemic, August 2020 was chosen for data collection period, as free time might increase the willingness of participate. Snowball sampling technique was adopted to increase the sample size and diversity by asking the participants to forward the surveys to their acquaintances and kept rolling within the collecting period. No special treatment was used for induction.

### Measures

An online questionnaire was developed. The questionnaire first collected the data of participant's training level on counselling, counselling experience and the type of student trauma experience that encountered. The questionnaire then used General Self-Efficacy Scale (GSES; Schwarzer & Jerusalem, 1995) to measure teacher self-efficacy on counselling and the Professional Quality of Life Scale Version 5 (ProQOL 5; Hundall Stamm, 2009) to assess teacher compassion satisfaction and compassion fatigue. Socio-demographic data and other personal teaching information were also collected.

Participant's training level was one of the hypothesizing moderators. It was divided in four levels: qualified counsellor or counselling psychologist, in school related experience, seminar attending only level and no counselling related experience or training. Participant experience on counselling, including the total number of students counselled, average

counselling time and maximum counselling time were also collected for exploratory examination.

According to a latest research that conducted by Boys' and Girls' Clubs Association of Hong Kong (Leung & Lai, 2019) before the social movement, the top three common traumatic events of Hong Kong children encountered were education related pressure, loss of family member and accident, others include abuse, illness, violence, etc. After the start of social movement, various reports of injury and judiciary procedure had been mentioned above. The questionnaire combined the common types of traumatic experience and adding the social situation, and then collected the encounter situation of the following seven types of trauma: loss of relatives, change of family structure, facing criminal charges, sexual related abuse, serious illness, serious injury and violence abuse. Although education related pressure was the most common trauma type of Hong Kong children, it was excluded in the questionnaire as it was the only trauma type that included in the teacher training, which meant teacher was expected to manage this kind of stress and distress.

For GSES, participants evaluated the extend of self-efficacy on 10 items, including "If I am in trouble, I can usually think of a solution" and "I can usually handle whatever comes my way", and self-reported on a 4-point Likert scale as 1:Not at all true, 2:Hardly true, 3:Moderately true and 4:Exactly true. The total score ranged between 10 and 40 which calculated by summing up all the marks of all items. The higher the score, the more the self-efficacy. The scale with a good reliability (Cronbach's alphas between 0.76 to 0.90) was correlated positively to satisfaction, emotion and optimism and negatively to burnout, stress, anxiety, depression and health complaints. Chinese version GSES was chosen for Hong Kong language setting (Schwarzer et al, 1997). Special mention of evaluating on counselling aspect was given at the beginning of the GSES in order to focus on measuring teacher self-efficacy on counselling.

For the ProQOL 5, participants self-evaluated in compassion satisfaction and compassion fatigue. Burnout and secondary traumatic stress were the two elements of compassion fatigue. Sample items of compassion satisfaction included “I get satisfaction from being able to [help] people.”; sample items of burnout included “I am not as productive at work because I am losing sleep over traumatic experiences of a person I [help].”. Five items of burnout score were reverse scored, including “I am happy.”; sample items of secondary traumatic stress included “I am preoccupied with more than one person I [help]”. The 30 mixed items were answered on a 5-point Likert scale starting from 1 (never) to 5 (very often) and counted separately according to the elements. Each element contained 10 items, and the scale score ranged from 10 to 50. The scale of compassion satisfaction was positively correlated with professional satisfaction (Cronbach alpha = 0.88); the scale of burnout was negatively correlated with the positive feelings about effectiveness of work (Cronbach alpha = 0.75); the scale of secondary traumatic stress was an indicator for reviewing work and work environment but not necessary implicating a problem (Cronbach alpha = 0.81). In order to let the target participants to read more smoothly, the substitute for [helper] was changed to teacher and some words were modified. Chinese version that provided by creator (Hundall Stamm, 2019) was used for data collection.

### Procedure

Participants consent was first collected by the first question of the online survey. After providing consent, participants filled in an online survey which followed by a debriefing form before the end of the survey. The whole procedure took approximately 20 minutes. Since the target participants were Cantonese speaking teacher, the questionnaire was conducted in traditional Chinese characters. Both GSES and ProQOL 5 had Chinese version.

### Statistical analysis

Report started with basic description on samples. Descriptive statistics was conducted by T-test and ANOVA to evaluate the difference among variables. Bivariate correlations and linear regression were used for examining the predation between variables. Moderation analysis of “student trauma encountered” and “teacher training on counselling” on the relationship between “teacher self-efficacy on counselling” and “teacher compassion satisfaction” and between “teacher self-efficacy on counselling” and “compassion fatigue” were conducted by PROCESS macro (Hayes, 2012). Data of no student trauma encountered was treated as reference group to check the moderation effect.

#### Ethical concerns

Complete informed consent was obtained with all participants, as the whole target group contained at least undergraduate level and had more than enough ability to comprehend the information of consent form. Participants were reminded to take breaks while feeling fatigue or uncomfortable and had right to withdraw whenever they wished followed by no negative consequences.

#### Results

96 responses were collected within the time period, 16 subscription were ruled out due to duplication, total 80 replies were valid. Categorical variables were collapsed for data analysis. Over 56% were male. Participants who were in the age ranges of 18-34 and 35-44 both over 40% respectively. 42 participants had married, over 70% participants didn't have offspring. 60% of the participants didn't have religion, so do the school they were servicing. Among all the participants, 33 of them had 11 years or above teaching experience, half of them worked in direct subsidy school, and over 30% worked in school without level. 68 of them were ranked at graduated master or above, but almost 60% didn't get a full-time permanent contract. Over 85% participants' job nature were counselling related, and 26 of them had more than 1 counselling related duty. 36 participants only contained seminar

attending level of counselling training, and 33 counselled 0-5 students in 1920 cohort. The highest percentage of average counselling time was 46.25% for 0-30 minutes, while maximum counselling time was more than 60 minutes with the same percentage. For student trauma encountered, the rate of never encountered was much higher than encountered over all seven types of trauma. The highest encountered rate trauma type was change in family structure (41.25%), followed by criminal charges (31.25%), grief (25%), violence (23.75%), serious illness (11%), sexual abuse (10%) and serious injury (5%). 36 participles encountered with 2 or more traumatized student, and 29 encountered with 2 or more trauma types.

Both General Self-efficacy Scale (GSES) ( $\alpha = 0.902$ ) and Professional Quality of Life scale (ProQOL) ( $\alpha = 0.734$ ) revealed high reliability. The three subscales of ProQOL, including compassion satisfaction (CS) ( $\alpha = 0.887$ ), secondary trauma stress (STS) ( $\alpha = 0.721$ ) and burnout (BO) ( $\alpha = 0.675$ ) revealed high to acceptable reliability.

Descriptive statistics were used for exploring the mean scores of ProQOL. ProQOL measured the quality of life by positive and negative aspects of helping. Positive referred to CS ( $M = 33.51$ ,  $SD = 5.82$ ) and negative referred to two subscales BO ( $M = 23.88$ ,  $SD = 4.69$ ) and STS ( $M = 23.20$ ,  $SD = 5.30$ ). According to the cut off values of ProQOL manual (Stamm, 2010), mean score of BO and STS which below 23 was belonged to low risk and above 41 was belonged to high risk. No high-risk group was revealed throughout all the socio-demographic characteristic (table 1), counselling experience and student trauma encountered (table 2) data; mean score of CS which below 23 meant that the participant might be facing challenge from the job or other reason and above 41 meant the participant had a professional satisfaction from the current position. An average compassion satisfaction level was revealed throughout all the socio-demographic characteristic (table 1), counselling experience and student trauma encountered (table 2) data.

For individual result, no high-risk level was revealed in both STS and BO, but over 50% of participants reported for moderate level of risk. 90% of participants maintained in moderate level of satisfaction, and 6 even showed a high level of CS (table 3). 5 patterns were described in the ProQOL manual (Stamm, 2010), and only 1 of them, pattern 2 was

Table 1. Professional Quality of Life (ProQOL) grouping by socio-demographic information

Variables	N	%	M	SD	lv	M	SD	lv	M	SD	lv
Total	80	100.00%	23.20	5.30	M	23.88	4.69	M	33.51	5.82	M
Socio-demographic variables											
Gender											
M	45	56.25%	23.78	5.46	L	24.13	4.63	M	32.53	6.27	M
F	35	43.75%	23.74	5.11	M	23.54	4.83	M	34.77	4.99	M
Age											
18 - 34	34	42.50%	23.17	5.11	M	24.28	4.31	M	34.13	4.18	M
35 - 44	35	43.75%	22.43	5.69	L	23.51	5.55	M	32.46	7.00	M
45 - 64	9	11.25%	23.11	5.35	M	23.67	4.42	M	34.44	6.42	M
Marital history											
never marry	35	43.75%	23.63	4.84	M	23.97	4.28	M	34.71	5.27	M
married	45	56.25%	22.87	5.66	L	23.80	5.04	M	32.58	6.11	M
Offspring											
no	57	71.25%	23.37	5.24	M	23.81	4.57	M	33.74	5.55	M
yes	23	28.75%	22.78	5.53	L	24.04	5.09	M	32.96	6.54	M
Own believe											
no	48	60.00%	23.52	5.41	M	24.73	4.22	M	33.00	5.63	M
yes	32	40.00%	22.72	5.18	L	22.59	5.13	L	34.28	6.11	M
Working school religion											
no	48	60.00%	24.10	5.78	M	24.56	4.39	M	33.31	5.73	M
yes	32	40.00%	21.84	4.21	L	22.84	5.01	L	33.81	6.04	M
Teaching experience											
0 - 5 years	24	30.00%	23.25	5.14	M	24.25	4.51	M	34.92	6.22	M
6 - 10 years	23	28.75%	24.04	4.92	M	24.35	3.96	M	32.39	5.04	M
11 years or above	33	41.25%	22.58	5.72	L	23.27	5.32	M	33.27	6.00	M
Job nature											
non full teacher	6	7.50%	23.33	4.32	M	22.00	3.35	L	37.83	5.67	M
full teacher	67	83.75%	23.10	5.37	M	23.90	4.86	M	32.99	5.80	M
management or above	7	8.75%	24.00	6.03	M	25.29	3.86	M	34.86	5.01	M
Form of employment											
permanent	33	41.25%	22.52	4.89	L	23.03	4.99	M	34.27	5.41	M
non permanent teacher	47	58.25%	23.68	5.57	M	24.47	4.43	M	32.98	6.10	M
Employed school nature											
government aided school	38	47.50%	22.87	4.84	L	23.32	4.76	M	35.34	5.69	M
direct subsidy scheme / private school	42	52.50%	23.50	5.72	M	24.38	4.63	M	31.86	5.50	M
Employed school level											
nil	30	37.50%	23.03	6.32	M	23.60	4.48	M	33.10	5.90	M
level 1	10	12.50%	25.50	3.24	M	24.50	4.35	M	36.70	4.27	M
level 2	22	27.50%	23.36	5.13	M	22.91	5.36	L	34.41	5.79	M
level 3	18	22.50%	22.00	4.42	L	25.17	4.38	M	31.33	5.89	M
Class tutor/mentor duty											
Non class tutor/mentor	20	25.00%	22.30	5.26	L	22.85	4.31	L	34.95	6.19	M
Class tutor/mentor	60	75.00%	23.50	5.32	M	24.22	4.80	M	33.03	5.67	M
Counselling post											
Non counselling post	44	55.00%	22.57	5.43	L	23.48	5.13	M	33.00	5.75	M
Counselling related post	36	45.00%	23.97	5.10	M	24.36	4.11	M	34.14	5.93	M
Student emotional support duty											
nil	10	12.50%	21.10	5.82	L	21.70	3.86	L	35.70	5.72	M
1 duty	42	52.50%	23.31	5.16	M	24.33	5.03	M	32.26	5.43	M
2 duties or above	28	35.00%	23.79	5.33	M	23.96	4.35	M	34.61	6.17	M

Notes. STS, BO and CS are the three measurements of ProQOL which represent secondary traumatic stress, burnout and compassion satisfaction respectively. *N*, *M* and *SD* are used to represent the sum of samples, mean and standard deviation respectively. *lv* are used to represent to the level of risk in ProQOL scale, and H, M, L represent high, moderate and low level of the subscale respectively.



Table 2. Professional Quality of Life (ProQOL) grouping by counselling experience and student trauma encounter

Variables	N	%	STS			BO			CS		
			M	SD	lv	M	SD	lv	M	SD	lv
Total	80	100.00%	23.20	5.30	M	23.88	4.69	M	33.51	5.82	M
Counselling experience											
Counselling training											
basic training or above	29	36.25%	23.38	4.13	M	23.07	4.60	M	34.55	6.14	M
attending seminar	36	45.00%	22.78	6.00	L	24.06	4.47	M	33.17	5.33	M
no relative training	15	18.75%	23.87	5.77	M	25.00	5.42	M	32.33	6.40	M
Student counselled in 1920											
0 - 5 students	33	41.25%	22.42	6.02	L	24.15	4.42	M	31.79	5.19	M
6 - 10 students	29	36.25%	24.38	4.62	M	23.62	5.47	M	34.93	5.57	M
11 students or above	18	22.50%	22.72	4.84	L	23.78	3.99	M	34.39	6.75	M
Average counselling time											
0 - 30 minutes	37	46.25%	23.41	5.51	M	24.35	4.18	M	31.89	5.81	M
31 - 60 minutes	34	42.50%	22.53	4.84	L	23.18	5.05	M	35.12	4.99	M
60 minutes above	9	11.25%	24.89	6.21	M	24.56	5.50	M	34.11	6.61	M
Maximum counselling time											
0 - 30 minutes	19	23.75%	22.68	5.76	L	24.32	3.83	M	31.16	6.31	M
31 - 60 minutes	24	30.00%	23.13	4.68	M	23.13	5.07	M	35.17	4.43	M
60 minutes above	37	46.25%	23.51	5.46	M	24.14	4.91	M	33.65	6.10	M
Traumatic Variables											
Grief											
No	60	75.00%	22.48	5.16	L	23.67	4.73	M	33.30	5.67	M
Yes	20	25.00%	25.35	5.25	M	24.50	4.66	M	34.15	6.36	M
Change in family structure											
No	47	58.75%	22.68	5.20	L	23.21	4.35	M	33.28	5.17	M
Yes	33	41.25%	23.94	5.43	M	24.82	5.06	M	33.85	6.72	M
Criminal charges											
No	55	68.75%	22.91	5.05	L	23.89	4.63	M	33.29	5.53	M
Yes	25	31.25%	23.84	5.86	M	23.84	4.94	M	34.00	6.52	M
Sexual abuse											
No	72	90.00%	22.93	5.26	L	23.90	4.80	M	33.10	5.81	M
Yes	8	10.00%	25.63	5.34	M	23.63	3.81	M	37.25	4.71	M
Serious illness											
No	71	88.75%	22.77	5.20	L	23.75	4.66	M	33.42	5.78	M
Yes	9	11.25%	26.56	5.15	M	24.89	5.11	M	34.22	6.46	M
Serious Injury											
No	76	95.00%	23.24	5.35	M	23.91	4.65	M	33.41	5.84	M
Yes	4	5.00%	22.50	4.80	L	23.25	6.34	M	35.50	5.97	M
Violence											
No	61	76.25%	22.82	5.37	L	23.26	4.81	M	33.49	5.71	M
Yes	19	23.75%	24.42	5.01	M	25.84	3.78	M	33.58	6.34	M
Traumatized student encountered											
0 student	28	35.00%	22.89	5.80	L	23.86	4.32	M	32.68	4.93	M
1 student	16	20.00%	22.31	4.05	L	22.88	5.48	L	33.38	6.61	M
2 students or above	36	45.00%	23.83	5.43	M	24.33	4.67	M	34.22	6.16	M
Student trauma type encountered											
0 type	28	35.00%	22.89	5.80	L	23.86	4.32	M	32.68	4.93	M
1 type	23	28.75%	21.87	4.08	L	22.43	5.23	L	34.30	7.06	M
2 types or above	29	36.25%	24.55	5.49	M	25.03	4.43	M	33.69	5.64	M

Notes. STS, BO and CS are the three measurements of ProQOL which represent secondary traumatic stress, burnout and compassion satisfaction respectively. *N*, *M* and *SD* are used to represent the sum of samples, mean and standard deviation respectively. *lv* are used to represent to the level of risk in ProQOL scale, and H, M, L represent high, moderate and low level of the subscale respectively.

Table 3. ProQOL subscales level

	STS		BO		CS	
	<i>N</i>	%	<i>N</i>	%	<i>N</i>	%
Total	80					
<i>lv</i>						
H	0	0.00%	0	0.00%	6	7.50%
M	43	53.75%	47	58.75%	72	90.00%
L	37	46.25%	33	41.25%	2	2.50%

*Notes.* STS, BO and CS are the three measurements of ProQOL which represent secondary traumatic stress, burnout and compassion satisfaction respectively. *lv* are used to represent to the level of risk in ProQOL scale, and H, M, L represent high, moderate and low level of the subscale respectively.

Table 4. ProQOL pattern

	STS	BO	CS		
				<i>N</i>	%
Total	80				
patthtern					
1	M	M	M / L	32	40.00%
2	M / L	M / L	H	6	7.50%
3	M / L	M / L	M	42	52.50%

*Notes.* STS, BO and CS are the three measurements of ProQOL which represent secondary traumatic stress, burnout and compassion satisfaction respectively. H, M, L represent high, moderate and low level of the subscale respectively.

Independent T-test and one-way ANOVA were used to test the difference of ProQOL and GSES between variables. According to the instruction of the ProQOL manual (Stamm, 2010), all three subscales of ProQOL would first be transformed to *t*-score. Among the demographic variables, participant with religion believe had a significant difference in BO,  $t(78) = 2.032, p = 0.046$ . The funding nature of participant servicing school had a significant difference in CS,  $t(78) = 2.786, p = 0.007$  (table 5). No statistical differences were observed

across counselling experience variables. Among student trauma encountered variables, 3 types of trauma had significant difference, including grief in STS,  $t(78)= 2.143, p= 0.035$ ; serious illness in STS,  $t(78)= 2.058, p= 0.043$ ; and violence  $t(78)= 2.139, p= 0.036$  (table 6).

No statistical differences were observed in GSES across all the variables.

Table 5. Professional Quality of Life (ProQOL)  $t$ -score and General Self-efficacy Score (GSES) grouping by socio-demographic information

Variables	STS $t$ -score				BO $t$ -score				CS $t$ -score			GSES		
	N	M	SD	$t/F$	M	SD	$t/F$		M	SD	$t/F$	M	SD	$t/F$
Total	80	50.66	10.15		50.09	10.00			50.23	9.84		22.90	5.24	
Socio-demographic variables														
Gender														
M	45	49.85	10.46	-0.81	50.64	9.85	0.56		48.58	10.60	-1.73	22.73	5.34	-0.32
F	35	51.70	9.79		49.38	10.28			52.36	8.44		23.11	5.17	
Age #														
18 - 34	36	52.14	9.42	0.75	50.95	8.25	0.24		51.57	7.08	1.03	22.67	5.83	0.12
35 - 44	35	49.18	10.90		49.32	11.83			48.45	11.83		23.23	5.16	
45 - 64	9	50.49	10.25		49.65	9.40			51.81	10.86		22.56	2.92	
Marital history														
never marry	35	51.48	9.27	0.64	50.29	9.11	0.16		52.26	8.91	1.65	22.91	5.80	0.02
married	45	50.02	10.85		49.93	10.73			48.65	10.33		22.89	4.83	
Offspring														
no	57	50.99	10.05	0.45	49.94	9.73	-0.20		50.61	9.39	0.54	22.60	5.33	-0.81
yes	23	49.86	10.59		50.45	10.85			49.29	11.05		23.65	5.04	
Own believe														
no	48	51.28	10.36	0.66	51.91	8.99	2.03*		49.37	9.51	-0.96	22.67	5.19	-0.49
yes	32	49.74	9.92		47.36	10.92			51.53	10.33		23.25	5.38	
Working school religion														
no	48	52.40	11.08	1.90	51.55	9.35	1.62		49.89	9.68	-0.37	22.48	5.56	-0.88
yes	32	48.06	8.06		47.89	10.67			50.74	10.21		23.53	4.74	
Teaching experience #														
0 - 5 years	24	50.76	9.84	0.52	50.89	9.61	0.46		52.61	10.51	1.16	23.79	6.74	0.79
6 - 10 years	23	52.28	9.43		51.10	8.43			48.34	8.52		21.87	4.97	
11 years or above	33	49.47	10.97		48.81	11.33			49.83	10.13		22.97	4.10	
Job nature #														
non full teacher	6	50.92	8.28	0.09	46.10	7.13	0.79		57.54	9.59	2.18	27.17	7.08	2.23
full teacher	67	50.48	10.28		50.13	10.35			49.34	9.81		22.58	5.12	
management or above	7	52.20	11.55		53.09	8.22			52.51	8.48		22.29	3.35	
Form of employment														
permanent	33	49.35	9.37	-0.97	48.29	10.63	-1.36		51.52	9.14	0.98	22.00	4.90	-1.29
non permanent teacher	47	51.58	10.67		51.35	9.44			49.33	10.30		23.53	5.43	
Employed school nature														
government aided school	38	50.03	9.28	-0.53	48.90	10.13	-1.01		53.32	9.61	2.79**	22.79	6.36	-0.18
direct subsidy scheme / private school	42	51.24	10.96		51.17	9.86			47.43	9.29		23.00	4.05	
Employed school level #														
nil	30	50.34	12.10	0.95	49.50	9.55	0.85		49.54	9.98	2.15	24.37	4.66	1.35
level 1	10	55.07	6.21		51.42	9.27			55.62	7.22		22.20	6.48	
level 2	22	50.98	9.84		48.03	11.42			51.75	9.78		22.32	5.59	
level 3	18	48.36	8.47		52.84	9.33			46.55	9.96		21.56	4.82	
Class tutor/mentor duty														
Non class tutor/mentor	20	48.94	10.09	-0.88	47.91	9.17	-1.13		52.66	10.45	1.28	23.55	5.15	0.64
Class tutor/mentor	60	51.24	10.19		50.82	10.22			49.42	9.58		22.68	5.30	
Counselling post														
Non counselling post	44	49.45	10.40	-1.18	49.24	10.93	-0.84		49.37	9.71	-0.87	23.45	4.57	1.05
Counselling related post	36	52.14	9.78		51.12	8.76			51.29	10.03		22.22	5.95	
Student emotional support duty #														
nil	10	46.64	11.15	0.97	45.46	8.22	1.29		53.93	9.66	2.24	23.80	4.26	0.29
1 duty	42	50.87	9.89		51.06	10.72			48.12	9.18		23.02	4.46	
2 duties or above	28	51.79	10.21		50.28	9.26			52.08	10.42		22.39	6.59	

Note. STS, BO and CS are the three measurements of ProQOL which represent secondary traumatic stress, burnout and compassion satisfaction respectively.  $N$ ,  $M$  and  $SD$  are used to represent the sum of samples, mean and standard deviation respectively. Variables without # are examined by Independent Sample T-test. Variables with # are examined by ANOVA. \* indicates  $p < .05$ . \*\* indicates  $p < .01$ .

Table 6. Professional Quality of Life (ProQOL) t-score and General Self-efficacy Score (GSES) grouping by counselling experience and student trauma encounter

Counselling Variables	N	STS t score			BO t score			CS t score			GSES		
		M	SD	t/F	M	SD	t/F	M	SD	t/F	M	SD	t/F
Variables													
Total	80	50.66	10.15		50.09	10.00		50.23	9.84		22.90	5.24	
Counselling experience #													
basic training or above	29	51.01	7.91	0.25	48.37	9.79	0.88	51.99	10.38	0.83	23.00	5.65	0.28
attending seminar	36	49.85	11.50		50.47	9.51		49.65	9.00		23.19	4.93	
no relative training	15	51.94	11.05		52.48	11.55		48.24	10.82		22.00	5.40	
Student counselled in 1920 #													
0 - 5 students	33	49.18	11.53	1.15	50.68	9.42	0.10	47.32	8.78	2.62	23.06	5.34	0.03
6 - 10 students	29	52.92	8.85		49.55	11.65		52.63	9.42		22.76	4.73	
11 students or above	18	49.75	9.27		49.88	8.50		51.71	11.41		22.83	6.08	
Average counselling time #													
0 - 30 minutes	37	51.06	10.56	0.75	51.10	8.90	0.66	47.49	9.96	2.91	23.00	4.80	0.30
31 - 60 minutes	34	49.38	9.27		48.60	10.75		52.95	8.57		22.50	5.94	
60 minutes above	9	53.90	11.91		51.54	11.72		51.24	11.84		24.00	4.50	
Maximum counselling time #													
0 - 30 minutes	19	49.67	11.34	0.15	51.03	8.16	0.44	46.25	10.66	2.64	24.37	5.05	1.01
31 - 60 minutes	24	50.52	8.98		48.49	10.79		53.03	7.49		22.25	5.19	
60 minutes above	37	51.26	10.46		50.64	10.45		50.46	10.31		22.57	5.37	
Traumatic Variables													
Grief													
No	60	49.29	9.88	-2.14*	49.65	10.06	-0.69	49.87	9.59	-0.56	22.68	5.33	-0.64
Yes	20	54.78	10.07		51.42	9.93		51.31	10.75		23.55	5.03	
Change in family structure													
No	47	49.67	9.97	-1.05	48.68	9.26	-1.52	49.83	8.73	-0.43	22.36	4.47	-1.10
Yes	33	52.08	10.40		52.10	10.78		50.80	11.35		23.67	6.17	
Criminal charges													
No	55	50.11	9.68	-0.73	50.12	9.85	0.05	49.86	9.34	-0.50	23.05	5.51	0.39
Yes	25	51.89	11.22		50.01	10.52		51.06	11.02		22.56	4.67	
Sexual abuse													
No	72	50.15	10.08	-1.37	50.15	10.23	0.16	49.53	9.82	-1.95	22.83	5.32	-0.34
Yes	8	55.31	10.24		49.56	8.12		56.55	7.97		23.50	4.69	
Serious illness													
No	71	49.85	9.96	-2.06*	49.82	9.93	-0.69	50.08	9.77	-0.39	22.75	5.20	-0.73
Yes	9	57.09	9.87		52.25	10.88		51.43	10.91		24.11	5.75	
Serious Injury													
No	76	50.73	10.25	0.27	50.16	9.89	0.27	50.06	9.86	-0.70	22.75	5.32	-1.12
Yes	4	49.32	9.19		48.76	13.51		53.59	10.09		25.75	1.71	
Violence													
No	61	49.93	10.28	-1.15	48.78	10.24	-2.14*	50.20	9.64	-0.06	22.87	5.46	-0.10
Yes	19	53.00	9.61		54.28	8.04		50.34	10.72		23.00	4.59	
Traumatized student encountered #													
0 student	28	50.07	11.12	0.52	50.05	9.19	0.53	48.82	8.33	0.55	22.29	5.41	0.29
1 student	16	48.96	7.75		47.96	11.66		50.00	11.18		23.31	5.49	
2 students or above	36	51.88	10.41		51.06	9.95		51.43	10.41		23.19	5.10	
Student trauma type encountered #													
0 type	28	50.07	11.12	1.75	50.05	9.19	2.02	49.34	8.64	0.51	22.29	5.41	0.48
1 type	23	48.11	7.82		47.02	11.14		51.57	11.93		23.74	5.93	
2 types or above	29	53.25	10.53		52.56	9.43		50.53	9.53		22.83	4.55	

Note. STS, BO and CS are the three measurements of ProQOL which represent secondary traumatic stress, burnout and compassion satisfaction respectively. N, M and SD are used to represent the sum of samples, mean and standard deviation respectively. Variables without # are examined by Independent Sample T-test. Variables with # are examined by ANOVA. \* indicates  $p < .05$ .

Bivariate correlation and linear regression were used to examine the correlation between variables.

BO and STS were the two elements of compassion fatigue (CF). GSES was significantly and negatively correlated with BO in a moderate level,  $r = -0.436$ ,  $p < .001$  (table 7). The results of a simple linear regression indicated that 19% of the variance in BO was explained by GSES,  $F(1, 78) = 18.349$ ,  $p < .001$ ,  $R^2 = .190$ . GSES significantly predicted BO just as the model hypothesized,  $b = -0.391$ ,  $t(78) = -4.284$ ,  $p < .001$ . However, GSES was not significantly correlated with STS,  $b = -0.188$ ,  $t(78) = -1.670$ ,  $p = .099$ . GSES was only partially correlated with CF, and hypothesis (1) was partly held.

GSES was positively correlated with CS just as model's hypothesis, and was in a moderate level significantly,  $r = 0.442$ ,  $p < .001$  (table 7). The results of a simple linear regression indicated that 19.5% of the variance in CS was explained by GSES,  $F(1, 78) = 18.929$ ,  $p < .001$ ,  $R^2 = .195$ . GSES significantly predicted CS as hypothesized in the model,  $b = 0.491$ ,  $t(78) = 4.351$ ,  $p < .001$ , and hypothesis (2) was held.

CS was negatively correlated with BO just as hypothesized and was in a significant moderate level,  $r = -0.508$ ,  $p < .001$  (table 7). The results of a simple linear regression indicated that 25.8% of the variance in BO was explained by CS,  $F(1, 78) = 27.067$ ,  $p < .001$ ,  $R^2 = .258$ . CS significantly predicted BO,  $b = -0.409$ ,  $t(78) = -5.203$ ,  $p < .001$ , but was not significantly correlated with STS,  $b = 0.068$ ,  $t(78) = 0.657$ ,  $p = .513$ . STS was only significantly correlated with BO positively and moderately,  $r = 0.532$ ,  $p < .001$  (table 7). The results of a simple linear regression indicated that 28.4% of the variance in BO was explained by STS,  $F(1, 78) = 30.867$ ,  $p < .001$ ,  $R^2 = .284$ . STS significantly predicted BO,  $b = 0.472$ ,  $t(78) = 5.556$ ,  $p < .001$ . Thus, compassion satisfaction was only partially correlated with CF in this research, and hypothesis (3) was partly held.

Furthermore, some of the variables correlated with different aspects of ProQOL, but not GSES.

Violence encountered was significantly correlated with BO positively in a weak level,  $r = 0.235$ ,  $p = .036$  (table 7). The results of a simple linear regression indicated that 5.5% of the variance in BO was explained by violence encountered,  $F(1, 78) = 4.574$ ,  $p = .036$ ,  $R^2 = .043$ . Violence encountered significantly predicted BO,  $b = 2.580$ ,  $t(78) = 2.139$ ,  $p = .036$ .

Grief encountered was significantly correlated with STS positively in a weak level,  $r = 0.236$ ,  $p = .035$  (table 7). The results of a simple linear regression indicated that 5.6% of the variance in STS was explained by grief encountered,  $F(1, 78) = 4.593$ ,  $p = .035$ ,  $R^2 = .056$ . Grief encountered significantly predicted STS,  $b = 2.867$ ,  $t(78) = 2.143$ ,  $p = .035$ .

Illness encountered was significantly correlated with STS positively in a weak level,  $r = 0.227$ ,  $p = .043$  (table 7). The results of a simple linear regression indicated that 5.2% of the variance in STS was explained by illness encountered,  $F(1, 78) = 4.236$ ,  $p = .043$ ,  $R^2 = .052$ . Illness encountered significantly predicted STS,  $b = 3.781$ ,  $t(78) = 2.058$ ,  $p = .043$ .

Some of the demography categories could also be the predictors.

Teacher with religion believe was negatively correlated with BO significantly in a weak level,  $r = -0.224$ ,  $p = .046$  (table 8). The results of a simple linear regression indicated that 5% of the variance in BO was explained by teacher with religion believe  $F(1, 78) = 4.131$ ,  $p = .046$ ,  $R^2 = .050$ . Teacher with religion believe significantly predicted BO,  $b = -2.135$ ,  $t(78) = -2.032$ ,  $p = .046$ .

Teacher who worked in government subsidy school was positively correlated with CS significantly in a weak level,  $r = 0.224$ ,  $p = .046$  (table 8). The results of a simple linear regression indicated that 9% of the variance in CS was explained by teacher who work in government subsidy school,  $F(1, 78) = 7.759$ ,  $p = .007$ ,  $R^2 = .090$ . Teacher who work in government subsidy school significantly predicted CS,  $b = 3.485$ ,  $t(78) = 2.786$ ,  $p = .007$ .



Moderation regression analysis was used to test the remain hypotheses.

Moderation regression analysis was used to test if student trauma encountered and teacher training on counselling had a significant moderation effect of the relationship between GSES and CF. BO and STS were the two elements of CF. There were 9 testing variances among student trauma encountered, including 7 types of student trauma encountered, sum of student trauma encountered, and sum of the student trauma type encountered.

CS	GSES	CT	CS	AT	MT	Gf	Fam	Cri	Sex	Ill	Inj	Vio	TrS	TrT
0.44***														
-0.14	-0.06													
0.20	-0.02	0.24*												
0.21	0.02	0.13	0.19											
0.13	-0.12	0.21	0.39***	0.56***										
0.06	0.07	0.02	0.18	0.34**	0.30**									
0.05	0.12	0.11	0.20	0.25*	0.30**	0.40***								
0.06	-0.04	0.06	0.13	0.27*	0.35**	0.42***	0.26*							
0.22	0.04	0.21	0.24*	0.36**	0.22	0.39***	-0.03	0.23*						
0.04	0.08	0.02	0.19	0.01	0.20	0.34**	0.18	0.19	0.28*					
0.08	0.13	0.10	0.13	0.12	0.01	0.27*	0.16	-0.03	0.12	0.46***				
0.01	0.01	-0.01	0.25*	0.16	0.32**	0.36**	0.31**	0.26*	0.21	0.36**	0.14			
0.12	0.08	0.15	0.28*	0.31**	0.41***	0.55***	0.65***	0.47***	0.34**	0.36**	0.23*	0.53***		
0.07	0.04	0.16	0.23*	0.36**	0.46***	0.64***	0.65***	0.57***	0.39***	0.37***	0.27*	0.55***	0.95***	

the measurements of ProQOL which represent secondary traumatic stress, burnout and compassion satisfaction respectively. GSES represents general self-efficacy scale. CT represents counseled students, AT represents average time of counselling section, MT represents maximum time of counselling section. Gf represents student in grief with family structure changed encountered, Cri represents student under criminal charges encountered, Sex represents student suffered from sexual abused encountered, Ill represents student with serious injury encountered, Vio represents student suffered from violence encountered. TrS represents traumatized student types encountered. \* indicates  $p < .05$ . \*\* indicates  $p < .01$ . \*\*\* indicates  $p < .001$ .

ProQOL, General Self-efficacy Score (GSES) and socio-demographic information

S	GSES	Age	Gen	Mar	OS	Bel	Rel	T_exp	T_job	T_form	Sch_form	Sch_lv	Cls	Cs	Duty
44***															
07	0.02														
19	0.04	-0.08													
18	0.00	0.46***	-0.19												
06	0.09	0.49***	-0.23*	0.56***											
11	0.06	0.297	0.00	0.41***	0.27*										
04	0.10	0.18	0.10	0.10	-0.12	0.17									
11	-0.06	0.625	-0.06	0.48***	0.34**	0.35**	0.32**								
09	-0.18	0.433	0.10	0.28*	0.19	-0.15	0.10	0.40***							
11	0.15	-0.08	-0.03	-0.28*	0.14	-0.15	-0.35**	-0.25**	-0.29**						
30**	-0.02	-0.12	0.22*	-0.12	-0.33**	-0.01	0.35**	0.05	0.10	-0.42***					
08	-0.21	0.10	-0.05	0.01	-0.12	0.04	0.53***	0.15	0.17	-0.31**	0.43***				
14	-0.07	-0.334	-0.07	-0.10	-0.08	0.12	-0.12	0.01	-0.20	0.04	-0.09	0.07			
10	-0.12	-0.03	0.17	-0.01	0.15	-0.02	-0.17	-0.15	0.03	0.04	0.20	0.03	-0.058		
03	-0.09	-0.256	0.12	-0.08	0.08	0.07	-0.20	-0.16	-0.15	0.10	0.13	0.06	0.55***	0.77***	

measurements of ProQOL which represent secondary traumatic stress, burnout and compassion satisfaction respectively. GSES represents general self-efficacy scale. Age represents age, OS represents marital history, OS represents offsprings, Bel represents personal believe, Rel represents the religion of the servicing school, T\_exp represents teaching experience, T\_job represents contract format of current post, Sch\_form represents the subsidy format of the servicing school, Sch\_lv represents the banding of the servicing school. CIs represents class related duty, Duty represents the sum of counselling related duty. \* indicates  $p < .05$ . \*\* indicates  $p < .01$ . \*\*\* indicates  $p < .001$ .



For GSES to BO, set grief encountered as the moderator, the overall model was significant,  $F(1, 74) = 4.155, p = .002, R^2 = .219$ , but all the main effect were non-significant. GSES did not predict BO,  $b = -0.335, t(74) = -1.143, p = .257$ ; grief encountered did not predict BO,  $b = 0.857, t(74) = 0.162, p = .872$ ; teacher training on counselling did not predict BO,  $b = -0.215, t(74) = -0.075, p = .940$ ; interaction 1 GSES X grief encountered did not predict BO,  $F(1, 74) = 0.004, p = .947, R^2 < .001$ ; interaction 2 GSES X teacher training on counselling did not predict BO,  $F(1, 74) = 0.487, p = .826, R^2 = .001$ .

Set change of family structure encountered as the moderator, the overall model was significant,  $F(1, 74) = 5.682, p = .002, R^2 = .277$ , but all the main effect were non-significant. GSES did not predict BO,  $b = -0.278, t(74) = -0.993, p = .329$ ; family structure encountered did not predict BO,  $b = 7.100, t(74) = 1.609, p = .112$ ; teacher training on counselling did not predict BO,  $b = -0.811, t(74) = -0.283, p = .778$ ; interaction 1 GSES X family structure encountered did not predict BO,  $F(1, 74) = 1.224, p = .272, R^2 = .012$ ; interaction 2 GSES X teacher training on counselling did not predict BO,  $F(1, 74) = 0.002, p = .962, R^2 < .000$ .

Set criminal charge encountered as the moderator, the overall model was significant,  $F(1, 74) = 4.528, p = .001, R^2 = .234$ , but all the main effect were non-significant. GSES did not predict BO,  $b = -0.225, t(74) = -0.766, p = .446$ ; criminal charge encountered did not predict BO,  $b = 7.664, t(74) = 1.550, p = .125$ ; teacher training on counselling did not predict

BO,  $b = -0.062$ ,  $t(74) = -0.022$ ,  $p = .983$ ; interaction 1 GSES X criminal charge encountered did not predict BO,  $F(1, 74) = 2.625$ ,  $p = .109$ ,  $R^2 = .027$ ; interaction 2 GSES X teacher training on counselling did not predict BO,  $F(1, 74) = 0.079$ ,  $p = .779$ ,  $R^2 = .001$ .

Set sexual abuse encountered as the moderator, the overall model was significant,  $F(1, 74) = 4.038$ ,  $p = .003$ ,  $R^2 = .214$ , but all the main effect were non-significant. GSES did not predict BO,  $b = -0.282$ ,  $t(74) = -0.955$ ,  $p = .343$ ; sexual abuse encountered did not predict BO,  $b = -6.519$ ,  $t(74) = -0.737$ ,  $p = .463$ ; teacher training on counselling did not predict BO,  $b = -0.368$ ,  $t(74) = 0.124$ ,  $p = .901$ ; interaction 1 GSES X sexual abuse encountered did not predict BO,  $F(1, 74) = 0.641$ ,  $p = .426$ ,  $R^2 = .007$ ; interaction 2 GSES X teacher training on counselling did not predict BO,  $F(1, 74) = 0.188$ ,  $p = .666$ ,  $R^2 = .002$ .

Set serious illness encountered as the moderator, the overall model was significant,  $F(1, 74) = 4.309$ ,  $p = .002$ ,  $R^2 = .226$ , but all the main effect were non-significant. GSES did not predict BO,  $b = -0.238$ ,  $t(74) = -0.800$ ,  $p = .427$ ; serious illness encountered did not predict BO,  $b = 5.916$ ,  $t(74) = 0.841$ ,  $p = .403$ ; teacher training on counselling did not predict BO,  $b = 0.612$ ,  $t(74) = 0.210$ ,  $p = .835$ ; interaction 1 GSES X serious illness encountered did not predict BO,  $F(1, 74) = 0.351$ ,  $p = .556$ ,  $R^2 = .004$ ; interaction 2 GSES X teacher training on counselling did not predict BO,  $F(1, 74) = 0.235$ ,  $p = .630$ ,  $R^2 = .003$ .

Set serious injury encountered as the moderator, the overall model was significant,  $F(1, 74) = 4.647$ ,  $p = .001$ ,  $R^2 = .239$ , but all the main effect were non-significant. GSES did not predict BO,  $b = -0.371$ ,  $t(74) = -1.290$ ,  $p = .201$ ; serious injury encountered did not predict BO,  $b = -63.830$ ,  $t(74) = -1.707$ ,  $p = .092$ ; teacher training on counselling did not predict BO,  $b = -0.388$ ,  $t(74) = -0.137$ ,  $p = .891$ ; interaction 1 GSES X serious injury encountered did not predict BO,  $F(1, 74) = 2.996$ ,  $p = .088$ ,  $R^2 = .031$ ; interaction 2 GSES X teacher training on counselling did not predict BO,  $F(1, 74) = 0.012$ ,  $p = .915$ ,  $R^2 < .001$ .

Set violence encountered as the moderator, the overall model was significant,  $F(1, 74) = 5.525, p < .001, R^2 = .272$ , but all the main effect were non-significant. GSES did not predict BO,  $b = -0.141, t(74) = -0.476, p = .636$ ; violence encountered did not predict BO,  $b = 6.024, t(74) = 1.048, p = .299$ ; teacher training on counselling did not predict BO,  $b = 1.561, t(74) = 0.543, p = .589$ ; interaction 1 GSES X violence encountered did not predict BO,  $F(1, 74) = 0.329, p = .568, R^2 = .003$ ; interaction 2 GSES X teacher training on counselling did not predict BO,  $F(1, 74) = 0.663, p = .418, R^2 = .007$ .

Set the sum of student trauma encountered as the moderator, the overall model was significant,  $F(1, 74) = 4.408, p = .001, R^2 = .230$ , but all the main effect were non-significant. GSES did not predict BO,  $b = -0.304, t(74) = -1.055, p = .295$ ; the sum of student trauma encountered did not predict BO,  $b = 3.208, t(74) = 1.254, p = .214$ ; teacher training on counselling did not predict BO,  $b = -1.243, t(74) = -0.412, p = .681$ ; interaction 1 GSES X the sum of student trauma encountered did not predict BO,  $F(1, 74) = 1.122, p = .293, R^2 = .012$ ; interaction 2 GSES X teacher training on counselling did not predict BO,  $F(1, 74) = 0.016, p = .901, R^2 < .001$ .

Set the sum of student trauma type encountered as the moderator, the overall model was significant,  $F(1, 74) = 4.598, p = .001, R^2 = .237$ , but all the main effect were non-significant. GSES did not predict BO,  $b = -0.284, t(74) = -0.977, p = .332$ ; the sum of student trauma type encountered did not predict BO,  $b = 3.169, t(74) = 1.167, p = .247$ ; teacher training on counselling did not predict BO,  $b = -0.841, t(74) = -0.292, p = .771$ ; interaction 1 GSES X the sum of student trauma type encountered did not predict BO,  $F(1, 74) = 0.771, p = .383, R^2 = .008$ ; interaction 2 GSES X teacher training on counselling did not predict BO,  $F(1, 74) = 0.002, p = .965, R^2 < .001$ .

For GSES to STS, set grief encountered as the moderator, the overall model was non-significant,  $F(1, 74) = 1.643, p = .159, R^2 = .010$ , so did the main effects. GSES did not predict

STS,  $b = -0.236$ ,  $t(74) = -0.667$ ,  $p = .507$ ; grief encountered did not predict STS,  $b = 5.934$ ,  $t(74) = 0.925$ ,  $p = .358$ ; teacher training on counselling did not predict STS,  $b = -0.659$ ,  $t(74) = -0.190$ ,  $p = .850$ ; interaction 1 GSES X grief encountered did not predict STS,  $F(1, 74) = 0.212$ ,  $p = .647$ ,  $R^2 = .003$ ; interaction 2 GSES X teacher training on counselling did not predict STS,  $F(1, 74) = 0.031$ ,  $p = .861$ ,  $R^2 < .001$ .

Set change of family structure encountered as the moderator, the overall model was non-significant,  $F(1, 74) = 0.865$ ,  $p = .510$ ,  $R^2 = .055$ , so did the main effects. GSES did not predict STS,  $b = -0.228$ ,  $t(74) = -0.632$ ,  $p = .529$ ; change of family structure encountered did not predict STS,  $b = 1.971$ ,  $t(74) = 0.346$ ,  $p = .730$ ; teacher training on counselling did not predict STS,  $b = -0.499$ ,  $t(74) = -0.135$ ,  $p = .893$ ; interaction 1 GSES X change of family structure encountered did not predict STS,  $F(1, 74) = 0.006$ ,  $p = .939$ ,  $R^2 < .001$ ; interaction 2 GSES X teacher training on counselling did not predict STS,  $F(1, 74) = 0.009$ ,  $p = .994$ ,  $R^2 < .001$ .

Set criminal charge encountered as the moderator, the overall model was non-significant,  $F(1, 74) = 0.751$ ,  $p = .588$ ,  $R^2 = .048$ , so did the main effects. GSES did not predict STS,  $b = -0.187$ ,  $t(74) = -0.505$ ,  $p = .615$ ; criminal charge encountered did not predict STS,  $b = 5.578$ ,  $t(74) = 0.897$ ,  $p = .373$ ; teacher training on counselling did not predict STS,  $b = -0.633$ ,  $t(74) = -0.178$ ,  $p = .860$ ; interaction 1 GSES X criminal charge encountered did not predict STS,  $F(1, 74) = 0.603$ ,  $p = .440$ ,  $R^2 = .008$ ; interaction 2 GSES X teacher training on counselling did not predict STS,  $F(1, 74) = 0.024$ ,  $p = .877$ ,  $R^2 < .001$ .

Set sexual abuse encountered as the moderator, the overall model was non-significant,  $F(1, 74) = 1.036$ ,  $p = .403$ ,  $R^2 = .065$ , so did the main effects. GSES did not predict STS,  $b = -0.178$ ,  $t(74) = -0.490$ ,  $p = .625$ ; sexual abuse encountered did not predict STS,  $b = -2.630$ ,  $t(74) = -0.242$ ,  $p = .810$ ; teacher training on counselling did not predict STS,  $b = -0.014$ ,  $t(74) = -0.004$ ,  $p = .997$ ; interaction 1 GSES X sexual abuse encountered did not predict STS,  $F(1,$

74)= 0.273,  $p = .603$ ,  $R^2 = .004$ ; interaction 2 GSES X teacher training on counselling did not predict STS,  $F(1, 74) = 0.008$ ,  $p = .931$ ,  $R^2 < .001$ .

Set serious illness encountered as the moderator, the overall model was non-significant,  $F(1, 74) = 1.581$ ,  $p = .176$ ,  $R^2 = .097$ , so did the main effects. GSES did not predict STS,  $b = -0.097$ ,  $t(74) = -0.266$ ,  $p = .791$ ; serious illness encountered did not predict STS,  $b = 7.630$ ,  $t(74) = 0.883$ ,  $p = .380$ ; teacher training on counselling did not predict STS,  $b = 0.943$ ,  $t(74) = 0.265$ ,  $p = .792$ ; interaction 1 GSES X serious illness encountered did not predict STS,  $F(1, 74) = 0.167$ ,  $p = .684$ ,  $R^2 = .002$ ; interaction 2 GSES X teacher training on counselling did not predict STS,  $F(1, 74) = 0.077$ ,  $p = .782$ ,  $R^2 < .001$ .

Set serious injury encountered as the moderator, the overall model was non-significant,  $F(1, 74) = 1.046$ ,  $p = .400$ ,  $R^2 = .067$ , so did the main effects. GSES did not predict STS,  $b = -0.291$ ,  $t(74) = -0.809$ ,  $p = .421$ ; serious injury encountered did not predict STS,  $b = -73.351$ ,  $t(74) = -1.569$ ,  $p = .121$ ; teacher training on counselling did not predict STS,  $b = -0.784$ ,  $t(74) = -0.222$ ,  $p = .825$ ; interaction 1 GSES X serious injury encountered did not predict STS,  $F(1, 74) = 2.458$ ,  $p = .121$ ,  $R^2 = .031$ ; interaction 2 GSES X teacher training on counselling did not predict STS,  $F(1, 74) = 0.072$ ,  $p = .789$ ,  $R^2 < .001$ .

Set violence encountered as the moderator, the overall model was non-significant,  $F(1, 74) = 0.863$ ,  $p = .510$ ,  $R^2 = .055$ , so did the main effects. GSES did not predict STS,  $b = -0.111$ ,  $t(74) = -0.293$ ,  $p = .770$ ; violence encountered did not predict STS,  $b = 5.281$ ,  $t(74) = 0.715$ ,  $p = .477$ ; teacher training on counselling did not predict STS,  $b = 0.598$ ,  $t(74) = 0.162$ ,  $p = .872$ ; interaction 1 GSES X violence encountered did not predict STS,  $F(1, 74) = 0.251$ ,  $p = .618$ ,  $R^2 = .003$ ; interaction 2 GSES X teacher training on counselling did not predict STS,  $F(1, 74) = 0.021$ ,  $p = .885$ ,  $R^2 < .001$ .

Set the sum of student trauma encountered as the moderator, the overall model was non-significant,  $F(1, 74) = 0.724$ ,  $p = .608$ ,  $R^2 = .047$ , so did the main effects. GSES did not

predict STS,  $b = -0.230$ ,  $t(74) = -0.634$ ,  $p = .528$ ; the sum of student trauma encountered did not predict STS,  $b = 1.798$ ,  $t(74) = 0.560$ ,  $p = .577$ ; teacher training on counselling did not predict STS,  $b = -1.053$ ,  $t(74) = -0.278$ ,  $p = .782$ ; interaction 1 GSES X the sum of student trauma encountered did not predict STS,  $F(1, 74) = 0.147$ ,  $p = .703$ ,  $R^2 = .002$ ; interaction 2 GSES X teacher training on counselling did not predict STS,  $F(1, 74) = 0.062$ ,  $p = .804$ ,  $R^2 = .001$ .

Set the sum of student trauma type encountered as the moderator, the overall model was non-significant,  $F(1, 74) = 0.952$ ,  $p = .453$ ,  $R^2 = .061$ , so did the main effects. GSES did not predict STS,  $b = -0.210$ ,  $t(74) = -0.576$ ,  $p = .566$ ; the sum of student trauma encountered did not predict STS,  $b = 2.889$ ,  $t(74) = 0.849$ ,  $p = .399$ ; teacher training on counselling did not predict STS,  $b = -1.176$ ,  $t(74) = -0.326$ ,  $p = .746$ ; interaction 1 GSES X the sum of student trauma encountered did not predict STS,  $F(1, 74) = 0.351$ ,  $p = .555$ ,  $R^2 = .005$ ; interaction 2 GSES X teacher training on counselling did not predict STS,  $F(1, 74) = 0.076$ ,  $p = .783$ ,  $R^2 = .001$ .

Among all the variables, all the overall models of BO were significant and none of the overall models of STS were significant. None of the variables revealed a conditional effect for teacher training on counselling on GSES to CF. Hypothesis (5) and (7) were partially held to BS, but not STS.

Moderation regression analysis was used to test if student trauma encountered and teacher training on counselling had a significant moderation effect of the relationship between GSES and CS. There were 9 testing variances among student trauma encountered, including 7 types of student trauma encountered, sum of student trauma encountered, and sum of the student trauma type encountered.

Set grief encountered as the moderator, the overall model was significant,  $F(1, 74) = 4.219$ ,  $p = .002$ ,  $R^2 = .222$ , but all the main effect were non-significant. GSES did not predict

CS,  $b = 0.192$ ,  $t(74) = 0.530$ ,  $p = .598$ ; grief encountered did not predict CS,  $b = -4.286$ ,  $t(74) = -0.653$ ,  $p = .516$ ; teacher training on counselling did not predict CS,  $b = -1.526$ ,  $t(74) = -0.431$ ,  $p = .668$ ; interaction 1 GSES X grief encountered did not predict CS,  $F(1, 74) = 0.533$ ,  $p = .468$ ,  $R^2 = .006$ ; interaction 2 GSES X teacher training on counselling did not predict CS,  $F(1, 74) = 0.516$ ,  $p = .475$ ,  $R^2 = .005$ .

Set change of family structure encountered as the moderator, the overall model was significant,  $F(1, 74) = 6.688$ ,  $p < .001$ ,  $R^2 = .311$ . For the main effect, GSES did not predict CS,  $b = 0.134$ ,  $t(74) = 0.395$ ,  $p = .694$ ; change of family structure encountered significantly predict CS,  $b = -16.988$ ,  $t(74) = -3.179$ ,  $p = .002$ ; teacher training on counselling did not predict CS,  $b = 1.486$ ,  $t(74) = .428$ ,  $p = .670$ ; interaction 1 GSES X change of family structure encountered significantly predict CS,  $F(1, 74) = 10.238$ ,  $p = .002$ ,  $R^2 = .095$ ; interaction 2 GSES X teacher training on counselling did not predict CS,  $F(1, 74) = 5.444$ ,  $p = .848$ ,  $R^2 < .001$ . In condition of no change of family structure encountered, training level did not predict CS; in condition of change of family structure encountered, low training level,  $b = 0.825$ ,  $t(74) = 4.035$ ,  $p < .001$ , moderate training level,  $b = 0.835$ ,  $t(74) = 5.436$ ,  $p < .001$ , and high training level,  $b = 0.825$ ,  $t(74) = 4.035$ ,  $p < .001$ , also predicted CS significantly. The higher the training, the smaller the effect.

Set criminal charge encountered as the moderator, the overall model was significant,  $F(1, 74) = 5.457$ ,  $p < .001$ ,  $R^2 = .270$ . For the main effect, GSES did not predict CS,  $b = 0.060$ ,  $t(74) = 0.170$ ,  $p = .866$ ; criminal charge encountered significantly predict CS,  $b = -12.157$ ,  $t(74) = -2.030$ ,  $p = .046$ ; teacher training on counselling did not predict CS,  $b = -1.937$ ,  $t(74) = -0.564$ ,  $p = .575$ ; interaction 1 GSES X criminal charge encountered significantly predict CS,  $F(1, 74) = 4.960$ ,  $p = .029$ ,  $R^2 = .049$ ; interaction 2 GSES X teacher training on counselling did not predict CS,  $F(1, 74) = 0.758$ ,  $p = .387$ ,  $R^2 = .008$ . In condition of no criminal charge encountered, training level did not predict CS; in condition of criminal charge encountered,

low training level,  $b = 0.823$ ,  $t(74) = 3.308$ ,  $p = .002$ , moderate training level,  $b = 0.917$ ,  $t(74) = 4.083$ ,  $p < .001$ , and high training level,  $b = 1.011$ ,  $t(74) = 4.053$ ,  $p < .001$ , also predicted CS significantly. The higher the training, the higher the effect.

Set sexual abuse encountered as the moderator, the overall model was significant,  $F(1, 74) = 4.827$ ,  $p = .001$ ,  $R^2 = .246$ , but all the main effect were non-significant. GSES did not predict CS,  $b = 0.254$ ,  $t(74) = 0.706$ ,  $p = .482$ ; sexual abuse encountered did not predict CS,  $b = 6.614$ ,  $t(74) = 0.615$ ,  $p = .540$ ; teacher training on counselling did not predict CS,  $b = -1.691$ ,  $t(74) = -.471$ ,  $p = .639$ ; interaction 1 GSES X sexual abuse encountered did not predict CS,  $F(1, 74) = 0.922$ ,  $p = .762$ ,  $R^2 = .001$ ; interaction 2 GSES X teacher training on counselling did not predict CS,  $F(1, 74) = 4.542$ ,  $p = .502$ ,  $R^2 = .005$ .

Set serious illness encountered as the moderator, the overall model was significant,  $F(1, 74) = 4.420$ ,  $p = .001$ ,  $R^2 = .230$ , but all the main effect were non-significant. GSES did not predict CS,  $b = 0.139$ ,  $t(74) = 0.378$ ,  $p = .706$ ; serious illness encountered did not predict CS,  $b = -10.210$ ,  $t(74) = -1.173$ ,  $p = .246$ ; teacher training on counselling did not predict CS,  $b = -2.209$ ,  $t(74) = -.612$ ,  $p = .543$ ; interaction 1 GSES X serious illness encountered did not predict CS,  $F(1, 74) = 1.400$ ,  $p = .241$ ,  $R^2 = .015$ ; interaction 2 GSES X teacher training on counselling did not predict CS,  $F(1, 74) = 0.730$ ,  $p = .399$ ,  $R^2 = .008$ .

Set serious injury encountered as the moderator, the overall model was significant,  $F(1, 74) = 4.111$ ,  $p = .002$ ,  $R^2 = .217$ , but all the main effect were non-significant. GSES did not predict CS,  $b = 0.242$ ,  $t(74) = 0.670$ ,  $p = .505$ ; serious injury encountered did not predict CS,  $b = 20.278$ ,  $t(74) = 4.311$ ,  $p = .668$ ; teacher training on counselling did not predict CS,  $b = -1.561$ ,  $t(74) = -.439$ ,  $p = .662$ ; interaction 1 GSES X serious injury encountered did not predict CS,  $F(1, 74) = 0.181$ ,  $p = .672$ ,  $R^2 = .002$ ; interaction 2 GSES X teacher training on counselling did not predict CS,  $F(1, 74) = 0.507$ ,  $p = .478$ ,  $R^2 = .005$ .



Set violence encountered as the moderator, the overall model was significant,  $F(1, 74) = 4.250, p = .002, R^2 = .223$ , but all the main effect were non-significant. GSES did not predict CS,  $b = 0.138, t(74) = 0.363, p = .717$ ; violence encountered did not predict CS,  $b = -6.315, t(74) = -0.858, p = .394$ ; teacher training on counselling did not predict CS,  $b = -2.277, t(74) = -0.618, p = .538$ ; interaction 1 GSES X violence encountered did not predict CS,  $F(1, 74) = 0.721, p = .399, R^2 = .008$ ; interaction 2 GSES X teacher training on counselling did not predict CS,  $F(1, 74) = 0.737, p = .393, R^2 = .008$ .

Set the sum of student trauma encountered as the moderator, the overall model was significant,  $F(1, 74) = 6.226, p < .001, R^2 = .296$ . For the main effect, GSES did not predict CS,  $b = 0.194, t(74) = 0.568, p = .572$ ; the sum of student trauma encountered significantly predict CS,  $b = -7.972, t(74) = -2.628, p = .010$ ; teacher training on counselling did not predict CS,  $b = 1.832, t(74) = 0.512, p = .610$ ; interaction 1 GSES X the sum of student trauma encountered marginally predict CS,  $F(1, 74) = 8.038, p = .059, R^2 = .077$ ; interaction 2 GSES X teacher training on counselling did not predict CS,  $F(1, 74) = 0.096, p = .757, R^2 = .001$ . In condition of no student trauma encountered, training level did not predict CS; in condition of 1 student trauma encountered, low training level,  $b = 0.533, t(74) = 3.257, p = .002$ , moderate training level,  $b = 0.498, t(74) = 4.558, p < .001$ , and high training level,  $b = 0.463, t(74) = 3.074, p = .003$ , also predicted CS significantly; in condition of 2 or more students trauma encountered, low training level,  $b = 0.866, t(74) = 3.796, p < .001$ , moderate training level,  $b = 0.831, t(74) = 4.988, p < .001$ , and high training level,  $b = 0.796, t(74) = 4.668, p < .001$ , also predicted CS significantly. In both conditions, the higher the training level, the lower the effect, and the larger sum of student trauma encountered, the higher the effects.

Set the sum of student trauma type encountered as the moderator, the overall model was significant,  $F(1, 74) = 5.450, p < .001, R^2 = .269$ . For the main effect, GSES did not predict CS,  $b = 0.890, t(74) = .252, p = .802$ ; the sum of student trauma type encountered

significantly predict CS,  $b = -7.194$ ,  $t(74) = -2.181$ ,  $p = .032$ ; teacher training on counselling did not predict CS,  $b = -0.091$ ,  $t(74) = -0.026$ ,  $p = .979$ ; interaction 1 GSES X the sum of student trauma type encountered significantly predict CS,  $F(1, 74) = 5.319$ ,  $p = .024$ ,  $R^2 = .053$ ; interaction 2 GSES X teacher training on counselling did not predict CS,  $F(1, 74) = 0.083$ ,  $p = .775$ ,  $R^2 = .001$ . In condition of no student trauma type encountered, training level did not predict CS; in condition of 1 student trauma type encountered, low training level,  $b = 0.486$ ,  $t(74) = 2.961$ ,  $p = .004$ , moderate training level,  $b = 0.517$ ,  $t(74) = 4.610$ ,  $p < .001$ , and high training level,  $b = 0.549$ ,  $t(74) = 3.667$ ,  $p = .001$ , also predicted CS significantly; in condition of 2 or more student trauma types encountered, low training level,  $b = 0.766$ ,  $t(74) = 3.383$ ,  $p = .001$ , moderate training level,  $b = 0.797$ ,  $t(74) = 4.488$ ,  $p < .001$ , and high training level,  $b = 0.829$ ,  $t(74) = 4.366$ ,  $p < .001$ , predicted CS significantly. In both conditions, the higher the training level, the higher the effect, and the larger sum of student trauma type encountered, the higher the effects.

Among all the variables, all the overall models were significant, only change of family structure encountered, criminal charge encountered, the sum of student trauma encountered and the sum of student trauma type encountered revealed a conditional effect for teacher training on counselling. Hypothesis (4) and (6) were partially

Teaching training on counselling was not statistically significant directly to all the variables, but it revealed significant condition effect in some models when there were student trauma encountered. Therefore, post hoc analysis was conducted to explore the moderation effect of “teacher training on counselling” on the relationship between student trauma encountered and CF which had revealed significant correlation and prediction in linear regression, including violence encountered to BO, grief encountered to STS, and serious illness encountered to STS.

For violence encountered to BO, the overall model was not significant,  $F(1, 76)= 2.807$ ,  $p= .045$ ,  $R^2= .100$ . Violence encountered marginally predicted BO,  $b= 7.804$ ,  $t(76)= 1.973$ ,  $p= .052$ ; teacher training on counselling did not predict BO,  $b= -0.451$ ,  $t(76)= -0.571$ ,  $p= .570$ ; the interaction did not predict BO,  $F(1, 76)= 1.934$ ,  $p= .168$ ,  $R^2= .023$ .

For grief encountered to STS, the overall model was not significant,  $F(1, 76)= 1.618$ ,  $p= .192$ ,  $R^2= .060$ . Grief encountered did not predicted STS,  $b= 0.428$ ,  $t(76)= 0.953$ ,  $p= .924$ ; teacher training on counselling did not predict STS,  $b= -0.397$ ,  $t(76)= -0.431$ ,  $p= .668$ ; the interaction did not predict STS,  $F(1, 76)= 0.324$ ,  $p= .571$ ,  $R^2= .004$ .

counselling on the relationship between General Self-efficacy Score (GSES) and Professional Quality of Life (ProQOL)

	GSES>CS			GSES>BO			GSES*trauma>BO			GSES*train>BO			GSES>STS			GSES*trauma>STS			GSES*train>STS		
p	F	R <sup>2</sup>	p	F	R <sup>2</sup>	p	F	R <sup>2</sup>	p	F	R <sup>2</sup>	p	F	R <sup>2</sup>	p	F	R <sup>2</sup>	p	F	R <sup>2</sup>	p
**	5.44	0.00		4.16	0.22	**	0.00	0.00		0.49	0.00		1.64	0.10		0.21	0.00		0.03	0.00	
*	0.76	0.01		5.68	0.28	**	1.22	0.01		0.00	0.00		0.87	0.06		0.01	0.00		0.01	0.00	
				4.53	0.23	**	2.63	0.03		0.08	0.00		0.75	0.05		0.60	0.01		0.02	0.00	
	4.54	0.01		4.04	0.21	**	0.06	0.01		0.19	0.00		1.04	0.07		0.27	0.00		0.01	0.00	
	0.73	0.01		4.31	0.23	**	0.35	0.00		0.24	0.00		1.58	0.10		0.17	0.02		0.08	0.00	
	0.51	0.01		4.65	0.24	**	3.00	0.03		0.01	0.00		1.05	0.07		2.46	0.03		0.07	0.00	
	0.74	0.01		5.53	0.27	***	0.33	0.00		0.66	0.01		0.86	0.06		0.25	0.00		0.02	0.00	
	0.10	0.01		4.41	0.23	**	1.12	0.01		0.02	0.00		0.72	0.05		0.15	0.00		0.06	0.00	
*	0.08	0.00		4.60	0.24	**	0.77	0.01		0.00	0.00		0.95	0.06		0.35	0.01		0.08	0.00	

secondary traumatic stress, burnout and compassion satisfaction respectively. GSES represents general self-efficacy scale. > represents the direction of change. \* indicates p<.05. \*\* indicates p<.01. \*\*\* indicates p<.001.

Table 10. Condition effect of student trauma encountered and teacher training on counselling on the relationship between General Self-efficacy Score (GSES) and Professional Quality of Life (ProQOL)

Variables	GSES>CS		
	<i>b</i>	<i>t</i>	<i>p</i>
Change of family structure encountered			
no encountered			
Lv: low	0.09	0.50	
Lv: moderate	0.07	0.42	
Lv: high	0.05	0.23	
encountered			
Lv: low	0.82	4.03	***
Lv: moderate	0.80	5.44	***
Lv: high	0.78	4.85	***
Criminal charge encountered			
no encountered			
Lv: low	0.25	1.44	
Lv: moderate	0.34	2.68	
Lv: high	0.44	2.71	
encountered			
Lv: low	0.82	3.31	**
Lv: moderate	0.92	4.08	***
Lv: high	1.01	4.05	***
The sum of student trauma encountered			
0 encountered			
Lv: low	0.20	1.17	
Lv: moderate	0.17	1.07	
Lv: high	0.13	0.62	
1 encountered			
Lv: low	0.53	3.26	**
Lv: moderate	0.50	4.56	***
Lv: high	0.46	3.07	**
2 or above encountered			
Lv: low	0.87	3.80	***
Lv: moderate	0.83	4.99	***
Lv: high	0.80	4.67	***
The sum of student trauma type encountered			
0 type encountered			
Lv: low	0.21	1.15	
Lv: moderate	0.24	1.56	
Lv: high	0.27	1.38	
1 type encountered			
Lv: low	0.49	2.96	**

For serious illness encountered to STS, the overall model was significant,  $F(1, 76) = 2.807, p = .045, R^2 = .100$ . Serious illness encountered significantly predicted STS,  $b = 16.451, t(76) = 2.508, p = .014$ ; teacher training on counselling did not predict STS,  $b = 0.335, t(76) = 0.402, p = .689$ ; the interaction significantly predicted STS,  $F(1, 76) = 4.036, p = .048, R^2 = 0.048$ . Serious illness encountered significantly predicted STS in low training level,  $b = 10.742, t(76) = 2.749, p = .008$ , and moderate training level,  $b = 5.032, t(76) = 2.626, p = .010$ , but not in high training level,  $b = -0.667, t(76) = -0.236, p = .814$ . The higher the training, the lower STS when encountering serious illness.

Some of the socio-demographic variables also revealed significant correlation to CS / CF, including personal believe to BO and school aiding format to CS, thus post hoc analysis was also conducted to explore the moderation effect of socio-demographic variables on the relationship between GSES and CS / CF.

Set personal believe as the moderator on the relationship between GSES and BO, the overall model was significant,  $F(1, 76) = 7.603, p < .001, R^2 = .231$ . GSES predicted BO

significantly,  $b = -0.372$ ,  $t(76) = -3.151$ ,  $p = .002$ , while personal believe did not predicted CS,  $b = -1.406$ ,  $t(76) = -0.325$ ,  $p = .746$ . No significant moderation effect was revealed,  $F(1, 76) = 0.014$ ,  $p = .905$ ,  $R^2 < .001$ . Set the same personal believe as the moderator on the relationship between GSES and CS, the overall model was significant,  $F(1, 76) = 8.769$ ,  $p < .001$ ,  $R^2 = .257$ . GSES did not predict CS,  $b = 0.267$ ,  $t(76) = 1.852$ ,  $p = .068$ . Personal believe significantly predicted CS,  $b = -11.158$ ,  $t(76) = -2.118$ ,  $p = .037$ . Personal believe revealed a complete moderation effect,  $F(1, 76) = 5.600$ ,  $p = .021$ ,  $R^2 = .055$ . No personal believe showed no statistically significant,  $b = 0.266$ ,  $t(76) = 1.852$ ,  $p = .068$ , personal believe significantly moderate the relationship of GSES and CS,  $b = 0.795$ ,  $t(76) = 4.656$ ,  $p < .001$ . GSES predicted higher CS in participants with personal believe.

Set school aiding format as the moderator on the relationship between GSES and CS, the overall model was significant,  $F(1, 76) = 11.659$ ,  $p < .001$ ,  $R^2 = .231$ . GSES did not predicted CS,  $b = 0.011$ ,  $t(76) = 0.035$ ,  $p = .972$ , while school aiding format predicted CS significantly,  $b = -12.115$ ,  $t(76) = -2.266$ ,  $p = .026$ . However, no significant moderation effect was revealed,  $F(1, 76) = 2.655$ ,  $p = .107$ ,  $R^2 = .024$ .

Set marital history as the moderator, the overall model was significant,  $F(1, 76) = 9.098$ ,  $p < .001$ ,  $R^2 = .267$ . GSES did not predict CS,  $b = 0.271$ ,  $t(76) = 1.819$ ,  $p = .073$ . Marital history significantly predicted CS,  $b = -12.296$ ,  $t(76) = -2.416$ ,  $p = .018$ . Marital history revealed a complete moderation effect,  $F(1, 76) = 4.348$ ,  $p = .040$ ,  $R^2 = .043$ . No marital history showed no statistically significant,  $b = 0.271$ ,  $t(76) = 1.819$ ,  $p = .073$ , marital history significantly moderate the relationship of GSES and CS,  $b = 0.722$ ,  $t(76) = 4.591$ ,  $p < .001$ . GSES predicted higher CS in participants with marital history.

Set offspring as the moderator, the overall model was significant,  $F(1, 76) = 9.024$ ,  $p < .001$ ,  $R^2 = .263$ . GSES predicted CS,  $b = 0.344$ ,  $t(76) = 2.690$ ,  $p = .009$ . Offspring significantly predicted CS,  $b = -15.502$ ,  $t(76) = -2.587$ ,  $p = .012$ . Offspring revealed a

significant moderation effect,  $F(1, 76) = 5.870$ ,  $p = .018$ ,  $R^2 = .057$ . No offspring revealed a smaller effect,  $b = 0.344$ ,  $t(76) = 2.690$ ,  $p = .009$ , offspring revealed a larger effect,  $b = 0.951$ ,  $t(76) = 4.411$ ,  $p < .001$ . GSES predicted higher CS in participants with offspring.

Set age the moderator, the overall model was significant,  $F(1, 76) = 11.202$ ,  $p < .001$ ,  $R^2 = .307$ . GSES did not predict CS,  $b = -0.466$ ,  $t(76) = -0.420$ ,  $p = .125$ . Age significantly predicted CS,  $b = -15.316$ ,  $t(76) = -3.491$ ,  $p < .001$ . Age revealed a complete moderation effect,  $F(1, 76) = 11.609$ ,  $p = .001$ ,  $R^2 = .106$ . Young age showed no statistically significant,  $b = 0.180$ ,  $t(76) = 1.286$ ,  $p = .202$ , middle age significantly moderate the relationship of GSES and CS,  $b = 0.827$ ,  $t(76) = 5.72$ ,  $p < .001$ , senior age significantly moderate the relationship of GSES and CS,  $b = 1.473$ ,  $t(76) = 4.802$ ,  $p < .001$ . The higher the age, the higher CS was predicted by GSES.

Table 11. Interaction effect and condition effect of Post Hoc analysis

Variables		<i>F</i>	<i>R</i> <sup>2</sup>	<i>p</i>	<i>b</i>	<i>t</i>	<i>p</i>
Serious illness encountered *teacher training on counselling>STS		4.04	0.05	*			
	Lv: low				10.74	2.75	**
	Lv: moderate				5.03	2.63	**
	Lv: high				-0.67	-0.24	
GSES*personal believe>CS		5.60	0.55	*			
	no				0.27	1.85	
	yes				0.80	4.66	***
GSES*marital history>CS		4.35	0.04	*			
	never				0.27	1.82	
	experienced				0.72	4.59	***
GSES*offspring>CS		5.87	0.57	*			
	no				0.34	0.27	**
	yes				0.95	4.41	***
GSES*age>CS		11.61	0.11	***			
	young				0.18	1.29	
	middle				0.83	5.72	***
	senior				1.47	4.80	***

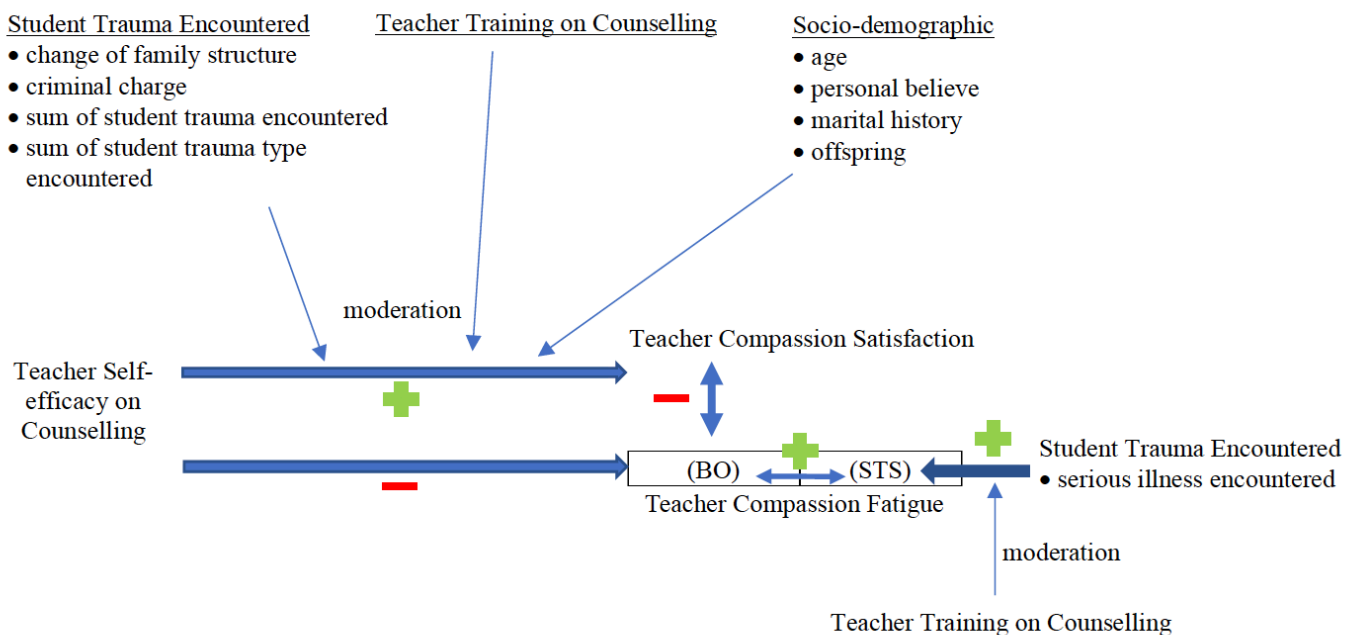
Note. STS and CS are the measurements of ProQOL which represent secondary traumatic stress and compassion satisfaction respectively. GSES represents general self-efficacy scale. \*> represents the moderation relation. *F* represents the effect size, *R*<sup>2</sup> represents the r square change. *b* represents the effect size, *t* represents the difference, Lv represents training level. \* indicates  $p < .05$ . \*\* indicates  $p < .01$ . \*\*\* indicates  $p < .001$ .

## Discussion

As hypothesized, GSES was the significant predictor of positive correlation to CS and of negative correlation to BO, one of elements of CF. CS was also significantly correlated with BO. However, GSES and CS had no significant correlation to STS, another CF element, and STS was only statistically correlated with BO. This might relate to the nature of STS.

Teaching training on counselling revealed significant moderation effect on the relationship on GSES and CS when there was student trauma encountered, including change of family structure encountered, criminal charge encountered, the sum of student trauma encountered, and the sum of student trauma type encountered. Equipping teacher with professional counselling skills was associated to higher CS when teacher encounter with student trauma. However, this hypothesis was not held on the relationship between GSES and CF, this might correlate with the primary trauma experience. Post hoc analysis found out that the moderation effect of teacher training on counselling at CF only revealed on the relationship between serious illness encountered and STS, which indicating a protection effect. Socio-demographic data including age, personal believe, marital history, and offspring also function as a moderator on the relationship between GSES and CS. These variables indicated the supporting effect.

Reversed model according to the results:



Vicarious traumatization



The result revealed moderate risk level of STS on Hong Kong teacher when they encountered with student that traumatized by serious illness and grief, and this is suspected to be associated with global pandemic crisis. Hong Kong teacher is not being counted or considered as a part of the counselling or mental health system, but counselling and mental care are a part of teacher's actual daily work. According to recent research, the prevalence of suspected PTSD was estimated to be five times higher under COVID-19 outbreak in 2019 than the "normal" year, this mental health crisis would cause the public medical and social welfare system approximately 112% burden (Ni & Yao, et al., 2020). Since teacher stay at the frontline of encountering student trauma, teacher would share the same burden as the welfare system in school setting. The vicarious traumatization scores among all kinds of health and mental health care related practitioners reminded abnormally high during the outbreak of COVID-19 (Aafjes-van Doorn, 2020; Benfant et al, 2020; Franza et al, 2020; Ventouris et al, 2000), so do the general public (Li et al, 2020). The findings support the hypothesis that teacher without counselling training was suffering from secondary trauma stress in 1920 cohort.

Besides, violence encountered significantly predicted BO, the more violence encountered, the higher BO, but no other variables revealed significant correlation or moderation the effect on violence encountered. As mentioned in the introduction, unrest social movement and global pandemic were the two main challenges that Hong Kong teacher faced during 1920 cohort, and the effect of COVID-19 was revealed in the STS of encountered with serious illness student. Another challenge, the consequence of social movement, might associate with the correlation of BO and violence encountered. Since violence and tension are temporary alleviated, and the latest challenge has shifted to the adjustment issue due to immigration ("中學收十多封退學信", 2020) and pathological worry about criminal charges under various title ("港版國安法"), criminal charges

encountered and change of family structure encountered might reveal significant correlation to teacher vicarious traumatization in future study.

#### Protect factors

The results revealed two protect factors which can help Hong Kong teachers to maintain psychological well-being while encountering with student trauma, and they are professional training on counselling and external support.

The effect of professional training was obvious in both defensive and positive way. For defensive, the result revealed that training on counselling protected teacher from vicarious traumatization on serious illness, the higher training level, the lower STS. This matched with the finding of Haiti that with proper training, the local helper reported a lower level of BO and STS than expected (Klappa, et al, 2016). For positive, the result also revealed another effect of training that the larger sum of student trauma and student trauma type encountered, the higher the CS; the higher training level, the higher CS grow in criminal charge encountered.

However, professional counselling and mental health supporting are not including in Hong Kong teacher training and could be considered as excessing the responsibility and duty of teacher. Since Hong Kong teacher is already suffering from heavy administrative workload and work for 60 hours or above weekly (HKPTU, 2016), counselling work could be the last straw that breaks the camel's back. Working for unwanted job or task would result in drop of motivation and raised in stress and fatigue (Aronsson & Göransson, 1999). Fatigue reduces the performance in endurance (Pageaux & Lepers, 2016), increase the level of psychological distress (Bültmann, et al., 2001), and eventually deteriorate into Chronic Fatigue Syndrome and various disease (Jason et al., 2000). No matter what kind of work, fatigue would be enlarged from time to time if we can't find the meaning of that work (Herlambang, Taatgen, & Cnossen, 2019). The entry point of teacher training on counselling should be enhancing the

motivation of teacher on counselling. Intention could be enhanced by self-efficacy and thus lead to satisfaction (Kao et al., 2020), which also matched the finding in the result.

The second protect factor is external support. The result revealed that with family and religion support, GSES predicted much higher CS than the one without. CS was related to greater strength and number of supports (Hinderer et al., 2014), and support from friends, family (Boyer, 2019; McCabe, Watrous, & Galarneau, 2020) and religion support (Newmeyer, 2016) could handle the sequelae of trauma much better and overcome the current distress faster. Also, COVID-19 is a kind of collective trauma which should not be faced alone, but the whole community (Duane et al, 2020). Teacher should seek for support in order to prevent psychological vulnerable, as self-care and social support from friends and family could enhancing internal resources (Kalaitzaki, 2020) and prevent STS (Manning-Jones, de Terte, & Stephens, 2016). Otherwise, when they encountered student with traumatic experience, they had a higher risk to suffer from vicarious traumatization.

#### Interpretation of student trauma encountered

Among seven types of student trauma, only grief and serious illness predicted STS significantly and revealed the pattern of the higher the encountered the higher the STS. Difference from the hypothesis, the result of other student trauma, including change of family structure and criminal charge, revealed an opposite pattern. Student trauma encountered was the moderator on the relationship between GSES and CS as suspected, surprisingly it moderated in a positive way that the more student trauma encountered, the higher CS of teacher.

Possible explanation for change of family structure is this kind of trauma was relative common to teacher and had been aware for decades (Hammond, 1981), and teacher could facilitate the support and help student to get better adjustment (Mahony et al, 2015). By

helping student relieve the distress that course by change of family structure, teacher could gain CS by encountering student trauma

For criminal charges encountered, there is not relative data and research that could support the current situation in Hong Kong. As the researcher himself is also a Hong Kong teacher, by daily observing and understanding, most of the criminal charges that confronted by student in 1920 cohort were political and social movement related. It is suspected that by helping student with court letter and as much as they can, teacher could gain CS in such extreme time and situation and reduce the guilty feeling of failing the next generation. This is also the feelings that told by colleagues of the researcher.

Student trauma could affect the psychological well-being of teacher, unless the teacher could handle the situation and help the student to deal with the trauma. By proper training on counselling, teacher could not only benefit from the protection effect, but also turn the trauma crisis to CS, and gain power for future challenge.

#### Other findings

One of the findings revealed the pattern that the higher the age, the higher CS was predicted by GSES, but the moderation effect was not significant on the younger age group. This might associate with the special situation of Hong Kong. Starting from 31 August 2009, school could employ teacher by 0.X pay rate, which means teacher were no longer guaranteed by permanent contract and full pay rate (HKSAR EDB, 2009). In 2010, Hong Kong Education Bureau cut two salary points from all new teacher (Hong Kong Professional Teachers' Union [HKPTU], 2020 September), which worth around 5.6k up to date. On the other hand, the number of special educational needs students and their number in public sector mainstream school raise to a new high (HKSAR Legislative Council Secretariat Research Office, 2019), but only 36% of Hong Kong teachers were equipped with basic training. In Hong Kong, SEN students are mainly taking care by younger teacher, and teacher

encountered with SEN is easily burnout (Lo,2017). Moreover, under current political pressure, teacher is being monitored, reported and even revoked license unfairly (HKPTU, 2020 October). Younger teacher suffered from unequal treatment, SEN workload and uncertainty, these kinds of stress might associate with the finding in compassion satisfaction.

One more minor finding is worth for discuss. The format of school aiding revealed significant different in CS, government aided school showed higher CS, while direct subsidy scheme (DSS) school showed lower. DSS is a scheme in Hong Kong education system., DSS schools can set their own criteria for admission of students (HKSAR EDB, 2020a), many DSS school refuse to admit SEN student (Ip, 2018) in order to focus on academic results. The lower CS might correlate with the smaller amount of student in needed encountered.

#### Limitation

According to the results, the sum of student trauma encountered and the sum of student trauma type encountered revealed a significant moderation and condition effect on the relationship between GSES and CS. However, among seven types of trauma, only change of family structure and criminal charge revealed the same effect. One of the possible reasons is the distress that caused by trauma could be mediated by external factors.

Change of family structure would lead to poor behaviour (Martinez Jr & Forgatch, 2002), drop out (Pong & Ju, 2000), delinquent (Burt, 2008), poor health (Anderson, 2014) and psychological vulnerable (Karela & Petrogiannis, 2020). These distresses could be mediated by the level of psychological control, rejection and laxness of the parent after divorce (Faubert et al, 1990), father-child relationship (Fabricius & Luecken, 2007), role diffusion, parental support and parental hostility (van Dijk et al, 2020). This means by strengthening the support and reducing the stress, student could get a better adjustment from the trauma of divorce.

As reviewed in the introduction, criminal charge led to various distress directly, and the following uncertainty will then cause pathological worry and depression. Another reason why criminal charge resulted in distress is the perception of the title of criminal. Non-criminal who was being stigmatized and criminalized showed significant discomfort, shamefulness and distress (Liegghio et al, 2020), and self-esteem could protect the “criminal” for internalized and anticipated stigma (Moore et al, 2018). Since most of the criminal charges that were political and social movement related, once the student didn’t consider themselves as guilty, evil or criminal and found themselves morally innocent, their self-esteem may alleviate the distress caused by criminal charges.

The rest of student trauma types, including grief, sexual abuse, serious illness, serious injury and violence, directly traumatized the student internally. This research has not taken account with the difference between the student trauma types, and the power of revealing the latest challenge of Hong Kong teacher might be affected.

Moreover, exposure to others’ trauma might not be the primary stressor of STS, but the personal prior unresolved posttraumatic stress (PTS; Breslau, Peterson, & Schultz, 2008). According to the research data as of March 2020, the prevalence of probable PTSD in Hong Kong adult was 25.3% to 36.1%, and the prevalence of posttraumatic growth reached 47.3% (Ng, 2020). Hong Kong teacher might also suffer from PTS by their own. Cheng and his team (2018) found out the difference between Han and Qiang officers who responded for disaster relief in Beichuan earthquake. Beichuan is one of the settlements of Qiang people, and Qiang officers revealed a higher STS and lower CS. This finding indicates the sense of belonging would affect the well-being of whom are experiencing the trauma. This research focuses on the seriousness of secondary trauma on Hong Kong teacher, which might underestimate the PTS level of teacher themselves, and thus the correlation or effect of PTS on STS.

Suggest follow-up studies

In the findings, most of the Hong Kong teacher revealed the pattern of moderate level of STS, BO and moderate to low level of CS. This pattern was not discussed in the ProQOL manual (Stamm, 2010), and it seems to be the pattern that no need to concern mostly. Latest finding suggested another angle to interpretation the ProQOL. De La Rosa and her team (2018) compared 30 studies with 5612 total sample size to check the cut score of ProQOL. She took 25% and 75% for cut off just as Stamm, and the result found that the second manual (Stamm, 2010) set a higher tolerance score than the manual of first edition (Stamm, 2005), and the current studies revealed a closer cut score to the first one (table 11). According to this result, the STS level of Hong Kong teachers might be underestimated.

Table 12. Comparison of ProQOL cut off score in various countries and parties.

Variables		STS				BO				CS			
				Sta	Rosa			Sta	Rosa			Sta	Rosa
Country	Party	M	SD	Lv		M	SD	Lv		M	SD	Lv	
Hong Kong	teacher	23.20	5.30	M	H	23.88	4.69	M	M	33.51	5.82	M	L
Nepel	mental health and psychosocial support	21.34	5.50	L	H	19.98	4.98	L	L	41.19	5.74	M	M
Italy	emergency healthcare operator	10.84	4.92	L	L	14.89	4.92	L	L	31.60	5.00	M	L
Spain	palliative care professionals	12.42	5.79	L	L	15.62	5.13	L	L	41.05	4.79	M	M
Brazil	palliative care professionals	14.24	6.47	L	M	15.05	6.34	L	L	41.63	6.61	M	M
China (Han)	nationality cadres of earthquake	16.55	7.17	L	L	22.30	4.89	L	L	38.59	7.12	M	M
China (Qiang)	nationality cadres of earthquake	20.70	6.63	L	M	20.08	5.03	L	L	34.64	8.94	L	L
America	family caregiver	22.16	6.94	M	H	24.47	6.43	M	M	34.18	M	M	L

Note. STS, BO and CS are the three measurements of ProQOL which represent secondary traumatic stress, burnout and compassion satisfaction respectively. Sta represents ProQOL manual version 2 cut off score (Shamm, 2010). Rosa represents the suggested ProQOL cut off score (De La Rosa et al., 2018). M, SD and Lv are used to represent the mean, standard deviation and ProQOL respectively. Highlighted variables represent a change in ProQOL level

Put a side De La Rosa and her team's (2018) suggestion, we can still clearly see the potential high risk of Hong Kong teacher. Comparing with the Mental Health and Psychosocial Support in Nepal who supported domestic or sexual violence, human trafficking to terror attack, civil war and earthquake (Adhikari, 2020), emergency healthcare operator in Italy (Carmassi et al., 2020), palliative care professionals in Spain and Brazil (Galiana, 2017), nationality cadres of earthquake in China (Cheng et al., 2018) and family caregiver in USA (Lynch, Shuster, & Lobo, 2018), Hong Kong teacher revealed the highest STS score, with

higher BO and lower CS than other countries' professional. The closest pattern was family caregiver, which was also untrained.

As mentioned in the literature review part, this is the first study of Hong Kong teacher by counsellor perspective, the result could be used as the pilot study data. Future study could focus on the compassion fatigue of Hong Kong teacher, by comparing with other local professional, mental health supporters and caregivers, followed by comparing with global situation, in order to have a much clear full picture. Since the pandemic is still ongoing and the education ecology of Hong Kong is rapidly deteriorating, the status of Hong Kong teacher's compassion satisfaction and compassion fatigue are worth for long-term follow-up study.

### Conclude

Hong Kong teachers are suffering from vicarious traumatization, although the early signs are still not taken seriously. Professional training on counselling could help teacher to relieve the stress and gain protection and need to be widely promoted as soon as possible. With support and proper training, encountering traumatized student could still receive positive feedback on compassion satisfaction, and thus become the motivation to teacher for further supporting, no matter the target is teacher or student. Yet, the challenge and mental wellbeing of Hong Kong teacher are still underestimated, which worth for future study and concern.



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## Appendix A

### Consent Form

#### 研究同意書

這是一份關於香港中學教師在輔導方面的自我效能與慈心疲倦之關係的研究，目標對象為 19-20 學年在香港中學任職的教育工作者。這份研究由香港樹仁大學社會輔導及心理學系心理學（社會科學）碩士課程學生李耀章(18P606M)負責，並由劉喜寶博士督導。

#### 1、研究目的

是次研究希望探討目標對象在輔導方面的自我效能與慈心疲倦之關係。現階段我無法向你提供有關此研究的所有信息，但在問卷完結後的匯報部份中，我將盡力向你解說。

#### 2、研究方法

本研究透過網上問卷平台製作。收到電子邀請的參加者，在簽署研究同意書後，將按指示填寫問卷，直至完成。問卷要求參加者填上簡短答案，而與個人資料相關的提問，則由選擇題及填充題組成。所有的題目均沒有既定對或錯的答案，可以放心作答。一般而言，完成整份問卷約需 20 分鐘。參加者的參與全屬自願性質，任何時候均可以停止作答，甚至退出是次研究，而不需面對追究。

#### 3、潛在風險

在填寫問卷的過程中，如參與者感到不適，請立即中止問卷。如有需要，可致電香港心理衛生會（24 小時免費心理健康輔導及資訊熱線：2772 0047），或香港撒瑪利亞防止自殺會（24 小時求助熱線：2389 2222）求助。

#### 4、 潛在得益及報酬

參加者不會因為參與或不參與是次研究而獲得任何報酬。原則上，參加者不會有任何直接得益，但參加者的回應，能幫助我研究香港教師輔導自我效能與慈心疲勞的關係，從而了解現時工作性質對教師的影響，是十分寶貴的資訊。

#### 5、 保密原則及資訊保存

為保密起見，是次研究將以匿名方式進行。參加者的所有回應，均視為機密資訊並加以小心保存。所有得到資訊，只會用作是次研究的用途，故不會與其他平台或研究者作資訊交流。用作匯報的資訊均會以統計資料形式報告，故不會含有任何可供辨識的資訊。透過網上問卷平台收集的資訊，將於 2020 年 12 月 31 日學期完結後之三個月內銷毀。

#### 6、 處理疑問

如對是次研究有疑問，歡迎透過電郵 [18p606m@hksyu.edu.hk](mailto:18p606m@hksyu.edu.hk) 與李耀章聯絡。如對作為研究參加者的權利有疑問，歡迎透過電郵 [hplau@hksyu.edu](mailto:hplau@hksyu.edu) 與劉博士聯絡。

☐ 我已仔細閱讀並了解以上資訊，並同意參加是次研究。

## Appendix B

## Questionnaire

## 問卷

我【李耀章 (18P606M)】是香港樹仁大學輔導及心理學系心理學（社會科學）碩士課程的學生，現誠邀你填寫是次研究的問卷。

本問卷的研究對象為於 19-20 學年在香港中學工作的教育工作者。

請問你是否於 19-20 學年在香港中學工作的教育工作者：

☐ 是（請繼續回答）

☐ 否（雖然你並非是次研究的對象，我亦衷心感謝你的支持。如方便，煩請將

本問卷傳至你認識的朋友，以助本研究收集更多數據。）

## 第一部份：輔導經歷

1、 你在輔導方面達到的最高培訓程度是？

☐ 合資格輔導員 / 輔導心理學家

☐ 曾參與輔導培訓 / 工作坊 / 講座

☐ 校內與輔導相關之經驗

☐ 並無輔導相關之培訓 / 經驗

2、 請回想在 19-20 學年中，你曾輔導了多少位學生：

☐ 並無相關經歷

☐ 0 – 5 位

☐ 6 – 10 位

☐ 11– 15 位

- ☐ 16 – 20 位
- ☐ 21 – 25 位
- ☐ 26 – 30 位
- ☐ 31 位或以上

3、 請回想在 19-20 學年中，你輔導每位學生時大約所用的平均時間（分鐘）：

- ☐ 並無相關經歷
- ☐ 0 – 15 分鐘
- ☐ 15 – 30 分鐘
- ☐ 30 – 45 分鐘
- ☐ 45 – 60 分鐘
- ☐ 60 分鐘以上未滿 120 分鐘
- ☐ 120 分鐘以上

4、 請回想在 19-20 學年中，你輔導一位學生時曾用的最長時間（分鐘）：

- ☐ 並無相關經歷
- ☐ 0 – 15 分鐘
- ☐ 15 – 30 分鐘
- ☐ 30 – 45 分鐘
- ☐ 45 – 60 分鐘
- ☐ 60 分鐘以上未滿 120 分鐘
- ☐ 120 分鐘以上

5、 請回想在 19-20 學年中，你輔導的學生裏可有遭遇過以下情況：

	從來沒有	1 個	2 個	3 個	4 個或以上
喪失親近的人					
家庭結構改變					
身處司法程序					
性相關的侵犯					
罹患嚴重疾病					
意外嚴重受傷					
各種暴力對待					



## 第二部份：一般自我效能量表 (GSES; Schwarzer & Jerusalem, 1995)

請根據 19-20 學年輔導學生的經歷來回答以下陳述，並選擇最切合的形容。

	完全 不正 確	有點 正確	多數 正確	完全 正確
1、如果我盡力去做的話，我總是能夠解決問題的				
2、即使別人反對我，我仍有辦法取得我所要的				
3、對我來說，堅持理想和達成目標是輕而易舉的				
4、我自信能有效地應付任何突如其來的事情				
5、以我的才智，我定能應付意料之外的情況				
6、如果我付出必要的努力，我一定能解決大多數的難題				
7、我能冷靜地面對困難，因為我信賴自己處理問題的能力				
8、面對一個難題時，我通常能找到幾個解決方法				
9、有麻煩的時候，我通常能想到一些應付的方法				
10、無論什麼事在我身上發生，我都能應付自如				

## 第三部份：專業生活品質量表(Hundall Stamm, 2009)

專業生活品質量表 Professional Quality of Life Scale (PROQOL)				
慈心滿意與慈心疲倦 (PROQOL) 版本 5 (2009)				
當你以 <b>教師</b> 身份輔導別人時，會直接接觸到他人的生活。你可能因此曾經經驗過正面及負面的影響。下列問題是有關你身為 <b>教師</b> 時所經歷過的正面及負面經驗。請依據你自己及目前的工作狀況，來回答下列的問題。				
請誠實地填選出最符合你在 19-20 學年中所經歷過的情況。				
1 = 從未有過		2 = 很少		3 = 有些時候
				4 = 經常如此
				5 = 總是如此
題	陳述			情況
1	我是快樂的。			
2	我腦中常充滿了一個以上我所輔導過的人。			
3	輔導人讓我得到滿足感。			
4	我覺得和其他人有所連繫。			
5	突如其來的聲響會讓我感到驚嚇。			
6	與需要被我輔導的人一起後，讓我感到神采奕奕。			
7	我發現要將我的個人生活與輔導的工作分開來是困難的。			
8	因為在輔導有嚴重創傷經驗的人時會睡得不好，所以我的工作效率會較差。			
9	我想我已經被這些我所輔導的嚴重創傷者所影響。			
10	從事輔導學生的工作讓我感到陷入困境。			
11	因為我的輔導學生工作，讓我對很多事情感到緊張。			
12	我喜歡從事輔導學生的工作。			

13	我所輔導的嚴重創傷經驗者讓我感到沮喪	
14	我覺得我彷彿經歷了那些我曾經輔助的嚴重創傷者有過的創傷。	
15	我有信念支持著我。	
16	我對於自己如何能夠把輔導學生的工作技巧與計劃保持進度感到滿意。	
17	我是我想要成為的人。	
18	我的工作使我感到滿意。	
19	我覺得筋疲力竭，因為我的工作是一個輔導學生的人。	
20	對於那些我輔導的人和我是如何可以幫助他們，我有開心的想法和感覺。	
21	我覺得很受不了，因為我的輔導學生工作負擔似乎沒有止盡。	
22	我相信透過我所做的，可以讓事情變得不同。	
23	我避免某些活動或情況，因為它們讓我想起了我輔導的人的可怕經歷。	
24	我很自豪我能做些什麼來輔導學生。	
25	由於我輔導學生的結果，我有被侵擾和令人恐懼的想法。	
26	我覺得「深陷」於制度的泥沼。	
27	我認為我是一個「成功」的輔導學生者。	
28	我不記得我的工作當中那些是跟創傷受害者有關的重要部分。	
29	我是一個非常有愛心的人。	
30	我很高興我選擇了做這份工作。	

**第四部份：背景資料**

1. 你的年齡屬於以下哪個組別？

- ☐ 18 – 24
- ☐ 25 – 34
- ☐ 35 – 44
- ☐ 45 – 54
- ☐ 55 – 64
- ☐ 65 或以上

2. 你的性別是？

- ☐ 男
- ☐ 女
- ☐ 其他

3. 你的婚姻狀況是？

- ☐ 從未結婚
- ☐ 已婚 / 同居
- ☐ 離婚 / 分居
- ☐ 喪偶

4. 你有多少名子女？

- ☐ 沒有
- ☐ 1 名

☐ 2 名

☐ 3 名或以上

5. 你的宗教信仰是？

☐ 沒有

☐ 儒教

☐ 道教

☐ 佛教

☐ 天主教

☐ 基督教

☐ 伊斯蘭教

☐ 其他

6. 你在 19-20 學年的受聘學校所屬宗教是？

☐ 沒有

☐ 儒教

☐ 道教

☐ 佛教

☐ 天主教

☐ 基督教

☐ 伊斯蘭教

☐ 其他

7. 你的教齡屬於以下哪個組別？

- ☐ 0 - 5 年
- ☐ 6 - 10 年
- ☐ 11 - 15 年
- ☐ 16 - 20 年
- ☐ 16 - 20 年或以上

8. 你在 19-20 學年的受聘職位是？

- ☐ 教師助理（TA）
- ☐ 混合型教師助理（TA + 授課 或 授課 + 一般行政）
- ☐ 副教師（AT）
- ☐ 文憑教師（CM）
- ☐ 學位教師（GM）
- ☐ 高級學位教師（SGM）
- ☐ 首席學位教師（PGM）

9. 你在 19-20 學年的受聘形式是？

- ☐ 全職長約制
- ☐ 全職合約制
- ☐ 全職合約制（半職教席）
- ☐ 兼職合約制

10. 你在 19-20 學年受聘的學校屬於以下哪種性質？

- ☐ 官立中學
- ☐ 津貼中學
- ☐ 直資中學
- ☐ 私立中學
- ☐ 技能訓練學校（完成主流化過程）
- ☐ 特殊學校

11. 你在 19-20 學年受聘的學校屬於以下哪個級別？

- ☐ 不適用
- ☐ 第一級別
- ☐ 第二級別
- ☐ 第三級別

12. 你在 19-20 學年的教擔是？（可選多項）

- ☐ 班主任 / 導師
- ☐ 訓輔組成員
- ☐ 輔導組成員（如學校獨立開設輔導組）
- ☐ 升學及就業輔導組成員
- ☐ 特殊學習需要組成員
- ☐ 以上皆不是

本問卷到此完結，感謝你的參與和支持。如果可以，請幫忙將此問卷轉發給身邊的朋友，以增加抽樣的多樣性。謝謝！





## Appendix C

### Debriefing Form

#### 研究解說

衷心感謝你參與本人的研究。

#### 1、 研究目的

在問卷開始前的同意書中，我指出是次研究的目的，是探討香港中學教師在輔導方面的自我效能與慈心疲倦是否相關。實際上，由於社會運動及新冠肺炎疫情影響，學生受創傷經歷的機率大幅提升。因此我假設教師接觸學生創傷經歷後，會受繼發性創傷壓力影響，我希望通過本研究提升教育界以至教師關注自己的心理健康。

為準確測試我的假設，我無法在你填寫問卷前向你提供所有詳細信息。這可以確保你在填寫問卷時能如實作答，而不受研究目的影響。如事前向你表明研究的實際目的，你在回想輔導學生時所產生的繼發性創傷壓力，可能會受到影響。我感到十分抱歉，希望你能明白並諒解這帶有隱瞞性質的處理手法。

#### 2、 保密

是次研究所收集的資料只作研究用途，當中並無任何可供識別身份的資料。所有資料將絕對保密，僅論文評審委員會及論文指導師可觸及。數據將於 2020 年 12 月 31 日學期完結後之三個月內銷毀。

在了解研究的真正目的後，你或許會不同意本研究使用你的數據。如果你希望你的數據從研究中移除及永久刪除，請現在關閉本網頁。在回答最終確認題前，所有數據並未送出及作記錄。

請不要向未來可能參與本研究的任何人披露研究程序和/或假設，因為這可能會影響研究結果。

#### 3、 學術資訊

為保持學術研究的良好傳統，及為增進參加者學術上的認知，以下是進一步的資訊：

- A. 這是一份關於香港中學教師在輔導學生時所產生的繼發性創傷壓力的心理研究，目標對象為 19-20 學年於香港中學任職的教育工作者。
- B. 在評估輔導的自我效能時，我採用了一般自我效能量表 General Self-Efficacy Scale (GSES; Schwarzer & Jerusalem, 1995)。GSES 最初由 Schwarzer 及 Jerusalem 於 1995 年提出，並於其後的研究中翻譯為多種語言版文，當中包括中文 (Schwarzer et al, 1997)。該問卷就自我效能作自我評估，共有十個項目，評分由 1 分（完全不正確）至 4 分（完全正確）。最終結果為綜合十項得分，得分愈高，代表自我效能愈高。
- C. 在評估繼發性創傷壓力時，我們採用了 Hundall Stamm (2009) 的專業生活品質量表。因教師並非專業輔導員或護理人員，繼發性創傷壓力相關的量表未必是最佳反映教師現況的量度工具。專業生活品質量表中包含三個元素，包括慈心滿意、耗竭及繼發性創傷壓力，當較有效區分教師因耗竭或繼發性創傷壓力而出現的慈心疲倦。
- D. 引用文獻

Hundall Stamm, B. (2009). *Professional Quality of Life Measure: Compassion, Satisfaction, and Fatigue Version 5 (ProQOL)* . Retrieved from [www.proqol.org](http://www.proqol.org)

Schwarzer, R., Bäßler, J., Kwiatek, P., Schröder, K., & Zhang, J. X. (1997). The assessment of optimistic self-beliefs: comparison of the German, Spanish, and Chinese versions of the general self-efficacy scale. *Applied Psychology*, 46(1), 69-88.

Schwarzer, R., & Jerusalem, M. (1995). Generalized Self-Efficacy scale. In J. Weinman, S. Wright, & M. Johnston, *Measures in health psychology: A user's guide to portfolio. Causal and control beliefs* (pp. 35-37). Windsor, UK: NFER-NELSON.

#### 4、 相關輔助

在完成本問卷後，你可瀏覽《賽馬會心導遊計劃》，了解更多輔導自己及他人的資訊（<https://www.jctourheart.org>）。如有需要，可致電香港心理衛生會（24 小時免費心理健康輔導及資訊熱線：2772 0047），或香港撒瑪利亞防止自殺會（24 小時求助熱線：2389 2222）求助。

#### 5、 有用的聯絡信息

如果你對本研究，其目的或程序有任何問題或疑慮，或有與研究相關的問題，請隨時透過電郵 [18p606m@hksyu.edu.hk](mailto:18p606m@hksyu.edu.hk) 與我（李耀章）聯絡。如果你對作為研究參與者的權利有任何疑問，可以透過電郵 [hplau@hksyu.edu](mailto:hplau@hksyu.edu) 與論文指導師劉喜寶博士聯絡。

☐ 我已仔細閱讀並了解本研究的實際目的，並仍然同意參加是次研究。