Triguna Personality and Vicarious Traumatization: A Comparative Study Between Trainee Therapists and Doctoral Scholars

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Abstract

Predominantly, investigations into personality predictors of vicarious traumatization have centered on Western personality paradigms, particularly the Big Five personality traits, thereby overlooking indigenous frameworks. To address this gap, the present study examined the relationship between Triguna personality and vicarious traumatization among trainee therapists and doctoral scholars in India. Employing a cross-sectional research design, the study compared these two groups (30 scholars and 30 trainees) using the Triguna and the Vicarious trauma scale. The results indicated no significant difference between scholars and trainees in levels of vicarious traumatization and Triguna traits. Furthermore, tamas and rajas guna correlated moderately with vicarious traumatization, and the findings were statistically significant for trainee therapists. A weak negative correlation was reported between sattva guna and vicarious traumatization for both groups. These findings underscore the need for clinical awareness about susceptibility to vicarious traumatization and also highlight the significant role of the indigenous personality framework in understanding psychological resilience and vulnerability in trauma work.

Keywords: *Triguna personality, secondary traumatization, trainee, qualitative researchers*.

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Introduction

The potential hazards of working with traumatized clients are well-acknowledged within the fields of counselling and psychotherapy (Figley, 1995; McCann & Pearlman, 1990). One such term to explain the detrimental impact of trauma work is vicarious traumatization, which refers to the psychological transformation that occurs among therapists due to empathetic engagement with clients' traumatic experiences (Pearlman & Saakvitne, 1995). Vicarious traumatization has the potential to negatively alter therapists' cognitive schemas (Hunter, 2012; Iliffe & Steed, 2000) and lead to profound shifts in their sense of self, worldview, and identity (Neumann & Gamble, 1995; Roberts et al., 2022; Tosone et al., 2012).

A vast body of research has shown that symptoms of vicarious traumatization are more prevalent among therapists with less clinical experience (Adams & Riggs, 2008; Parker & Henfield, 2012). Trainee therapists have been identified as a particularly high-risk group due to the immense pressure of managing multiple roles and a comparatively less developed competence in addressing the effects of vicarious traumatization (Pakenham & Stafford-Brown, 2012). Despite these identified risks, only a handful of studies have examined the specific factors linked to trainee therapists' experiences of vicarious traumatization (DelTosta et al., 2019; Makadia et al., 2017).

While the risk for therapists has long been recognized, the vulnerability of researchers to vicarious traumatization has only recently come to light (Dickson-Swift et al., 2008). Consequently, there is limited information available regarding researchers' experiences of vicarious traumatization (Smith et al., 2021). The nature of qualitative research, characterized by an emphasis on in-depth inquiry, frequent re-listening to audio transcripts, and researchers' enthusiasm for a topic, may make scholars more inclined to empathize deeply with participants, thus increasing their vulnerability to vicarious traumatization (Pollard, 2009; Branson & Radu, 2018). Given the considerable lack of quantitative research in this area, the current study attempts to address this gap by determining whether scholars engaging in qualitative research experience measurable levels of vicarious traumatization.

A substantial body of scholarly work has established that not all therapists exposed to their clients' traumatic narratives develop vicarious traumatization (Lerias & Byrne, 2003). Specific dispositional factors have been identified as significant modulators of this risk, with personality emerging as a primary intrinsic predictor of vicarious traumatization. Empirical evidence, largely derived from Western contexts, suggests that higher levels of

conscientiousness and extroversion are associated with reduced dysfunctional beliefs. Conversely, higher levels of neuroticism exacerbate vicarious trauma symptoms (Mairean & Turliuc, 2013; Bakshi et al., 2021). Furthermore, emotional stability and openness to experience typically correlate negatively with vicarious traumatization, while agreeableness is often linked with reduced traumatization (Maguire & Byrne, 2017).

In contrast to these Western frameworks, the concept of Triguna personality is rooted in the Samkhya School of Indian philosophy. This theory posits that the dynamic interplay of three fundamental qualities, namely sattva, rajas, and tamas, gives rise to all manifestations of existence, including personality (Dasgupta, 1961). Despite growing interest in applying the triguna framework within mainstream psychological research, its empirical status remains relatively underdeveloped (Ilavarasu et al., 2013). This disparity may be attributed to the prevalence of validated Western personality theories, which often overshadow indigenous frameworks. To address this empirical gap, it is imperative to investigate the Triguna personality using a robust theoretical framework and integrate it with contemporary constructs to assess its cross-cultural validity in predicting psychological outcomes.

Current study

The exploration of trainees' susceptibility despite their high-risk status has been sparse and selective. Similarly, qualitative researchers as a cohort have only recently been explored as a potential at-risk group for vicarious traumatization. Amid an upward trend towards integrating indigenous theories into scholarly discourse, it is imperative to scrutinize how these theories can enhance our understanding of specific phenomena. Hence, the current research aims to bridge the gap by determining the relationship between vicarious traumatization and triguna personality.

Objectives

The study had three objectives: (1) to measure the level of vicarious traumatization and triguna personality among doctoral scholars and M.Phil. trainees; (2) to determine if doctoral scholars and M.Phil. trainees differ in their levels of vicarious traumatization and triguna personality; and (3) to establish a relationship between triguna personality and vicarious traumatization. Simultaneously, four hypotheses were framed: (1) There would be no significant difference in the level of vicarious traumatization between scholars and trainees; (2) There would be no significant difference in personality in terms of gunas between scholars and trainees; (3) sattva guna would negatively correlate with vicarious traumatization, and (4) rajas and tamas guna would positively correlate with vicarious traumatization.

Method

Research Design

A cross-sectional research design was adopted to assess vicarious traumatization and triguna personality among M.Phil. trainees and doctoral scholars engaging in qualitative research.

Participants and setting

The study's target population consisted of M.Phil. trainees and doctoral scholars in psychology. A snowball sampling technique was employed to recruit sixty-eight participants. Specific inclusion criteria were established uniquely for each group. For M.Phil. trainees criteria included: (a) being in the second year of M.Phil. training and (b) having at least one year of experience providing direct patient care. For doctoral scholars, criteria included: (a) utilising a qualitative research framework; and (b) focusing on topics involving traumatic material; and (c) having collected at least some qualitative data. Any individuals who had experienced recent personal stressful events were advised not to take part in the study.

Materials and Procedure

The current research was conducted following the approval of the Research Conduct and Ethics Committee of Christ (Deemed to be University). Potential participants who fulfilled the inclusion criteria were invited to participate. Participation was entirely voluntary, and all respondents provided informed consent prior to data collection. Data were collected using the Triguna and the Vicarious trauma scale. Of the 68 participants who originally completed the survey, 8 were excluded due to statistical outliers. Consequently, a final sample of sixty responses was deemed suitable for further analysis.

Measures

a. Vicarious Trauma Scale [VTS; Vrleksvi & Franklin, (2008)]

The VTS is a self-report instrument developed to assess subjective distress associated with

working with traumatized populations. The scale consists of eight items rated on a 7-point Likert-like scale. In the current study, the scale demonstrated strong internal consistency (Cronbach's alpha coefficient of 0.826).

b. Triguna Personality Scale [TP; Bhal & Debnath, (2006)]

This scale consists of 15 items designed to measure the three dimensions of personality: Illumination (Sattva), Passion (Rajas), and Dullness (Tamas). The reported Cronbach alpha for the present sample was 0.80 for Tamas, 0.69 for Rajas, and 0.65 for Sattva guna.

Statistical Analysis

Data was analysed using IBM SPSS version 26.0. Initially, descriptive statistics were computed to summarize the dataset. Preliminary screening indicated no missing values; however, eight cases were identified as outliers and subsequently removed to ensure the normality of the distribution. Independent samples t-tests were conducted to examine whether significant differences existed between M.Phil. trainees and doctoral scholars regarding their levels of vicarious traumatization and triguna dimensions. Furthermore, Pearson's bivariate correlation analysis was performed to explore the relationship between the study variables.

Results

The study aimed to achieve three objectives. The first two objectives were to assess the levels of vicarious traumatization and Triguna personality among doctoral scholars and trainee therapists, and to determine whether significant differences exist between the two groups. To achieve this goal, descriptive and inferential statistics were computed.

The mean scores on the vicarious trauma scale for scholars and M.Phil. trainees were 4.59 and 4.49, respectively (see Table 1). Results of the independent-samples t-test showed no statistically significant difference, indicating that scholars and trainees' therapists reported similar levels of vicarious traumatization (t = -0.34, NS). Additionally, no meaningful practical difference was observed between the two groups, as indicated by a small Cohen's d (-0.09).

Table 1

Summary of descriptive statistics and t-test for independent sample on vicarious traumatization and Gunas between PhD scholars (n1= 30) and the M.Phil. trainees (n2 = 30).

Variables	M.Phil.		Ph.D.		Mean Difference	Std. Erro Difference	t-value *(df = 58)*	Cohen's d Effect Size
	Mean	**SD**	**Mean**	**SD**				
VT	4.49	1.01	4.59	1.32	-0.10	0.30	-0.34	-0.09
TG	15.23	4.66	14.10	4.66	1.13	1.20	0.94	0.24
RG	14.53	3.33	15.40	15.40	-0.87	1.09	-0.80	-0.24
SG	13.67	2.65	13.56	4.21	0.10	0.91	0.11	0.02

NOTE: Vicarious traumatization [VT]; Tamas guna [TG]; Rajas guna [RG]; Sattva guna [SG]

An independent-samples t-test was conducted to determine whether the two groups differed on triguna personality. The findings revealed no statistically significant differences between the scores of trainees and scholars' scores on sattva guna (t = 0.11, NS), tamas guna (t = 0.94, NS), and rajas guna (t = -0.80, NS). This suggests that both groups share similar personality characteristics regarding the three gunas. However, in the tamas and rajas gunas, a subtle practical difference was observed, in which trainees exhibited slightly higher tamasic tendencies than their scholar counterparts. On the other hand, scholars reported slightly higher rajasic tendencies compared to M.Phil. trainees. Although this effect size is small, it provides insights into the unique dispositional inclinations of each group.

Table 2

Summary of the bivariate correlation of coefficient between Triguna Personality as a predictor of vicarious traumatization.

Variables	**VT**	**SG**	**TG**	**RG**
Vicarious traumatization [VT]	1	*0.15*	*0.23*	*0.11*
Sattva guna [SG]	-0.24	1	*-0.23*	*-0.03*
Tamas guna [TG]	0.48**	-0.35*	1	-0.14

Rajas guna [RG]	0.44**	-0.19	0.29	1

Note. * p < .05, ** p < .01
Above the diagonal *r values* are represented for PhD scholars; below the diagonal r values are represented for M.Phil. trainees.

The third objective was to establish the relationship between the triguna personality and vicarious traumatization. To achieve this, Pearson's bivariate correlation analysis was performed for each group (see Table 2). For trainees, tamas guna (r = .48, p < .01) and rajas guna (r = .44, p < .01) showed a significant moderate positive correlation with vicarious traumatization.

In contrast, sattva guna exhibited a weak negative relationship with vicarious traumatization (r = -0.24), suggesting that higher sattvic tendencies may be linked to slightly lower levels of vicarious traumatization. Furthermore, a significant negative correlation was found between sattva guna and tamas guna (r = -0.35, P < .05), implying that individuals high in sattva guna tend to exhibit lower levels of tamas guna. These findings suggest that trainees with higher tamasic and rajasic traits are at a heightened risk for vicarious traumatization. For scholars (correlations above the diagonal), the correlation observed followed a similar direction but was weaker in magnitude and did not reach statistical significance.

Discussion

The present study investigated the levels of vicarious traumatization and guna distribution among M.Phil. trainees and doctoral scholars, and also established the relationship between the two study variables.

The initial findings indicate that the majority of trainees reported a moderate level of vicarious traumatization, which aligns with previous literature among trainee therapists (Maguire & Byrne, 2017; Mantia, 2020). This finding suggests that even during training, therapists are not insulated from the psychological cost of trauma work. Contrary findings, however, have also been reported, where trainees demonstrated lower levels of vicarious traumatization (Makadia et al., 2017). Such inconsistencies may be partly explained by methodological differences, particularly in the tools used to assess vicarious traumatization. For instance, the Trauma attachment belief scale is an extensive 84-item tool for assessing shifts in cognitive schemas. In contrast, the vicarious trauma scale is a concise 8-item scale designed for preliminary assessment of vicarious traumatization. Despite the difference, the current findings reinforce the notion that trainee therapists constitute a vulnerable group, emphasizing the need to incorporate training modules on trauma-informed care within training programs systematically.

Similar to trainees' experiences, scholars in the study also reported experiencing notable symptoms of vicarious traumatization following qualitative engagement with trauma-exposed populations. Although there is a dearth of quantitative evidence, existing qualitative literature has consistently highlighted the emotional toll of immersive research practices such as repeated engagement with distressing narratives (Williamson et al., 2020; Smith et al., 2021; Wallace & County, 2023). This finding expands the literature by providing empirical support for the presence of vicarious traumatization among researchers, thereby underscoring the need to conceptualize research work as a potential risk for secondary traumatization.

Interestingly, no significant differences were observed in the levels of vicarious traumatization between trainees and scholars. This indifference suggests that exposure to trauma, rather than professional role per se, may be a more critical determinant of vicarious traumatization. It is also possible that the shared academic background in psychology may have contributed to the lack of difference. Additionally, the indifference may be attributed to the vicarious trauma scale's lack of sensitivity in detecting group differences (Kadambi & Truscott, 2004). This finding highlights the need for future studies to examine contextual factors, such as caseload and supervision, to better understand differential vulnerability among the cohorts.

There also seemed to be no significant difference between the two groups in terms of their guna dispositions. One plausible explanation for this finding may be the relatively homogeneous age of the participants. Given that most participants were between 26 and 28 years old, the guna distribution could have been similar across both groups. Furthermore, the pattern of gunas distribution was such that the majority of the participants

scored low in sattva guna and high on rajas and tamas guna. This pattern observed in the study reflects the demanding nature of clinical training and doctoral research, which are often characterized by heightened activity (rajas) and periods of emotional fatigue/inertia (tamas). Prior research suggesting that sattva guna increases with age (Khanna et al., 2013; Bhangaokar et al., 2023) further supports this interpretation, indicating that maturity and life experience may foster psychological balance and clarity, characteristic features of sattva guna.

In terms of the relationship between vicarious trauma and triguna, the study found a positive correlation between tamas and rajas guna, and vicarious traumatization, suggesting that individuals with high levels of tamasic and rajas' guna are more susceptible to the adverse effects of trauma work. These findings parallel Western literature linking neuroticism to increased vulnerability to vicarious traumatization (Mairean & Turliuc, 2013; Bakshi et al., 2023). Surprisingly, these correlations were significant only for trainee therapists, possibly because trainees typically engage in sustained therapeutic relationships, whereas scholars often interact with participants for shorter durations, which may account for these differences.

Furthermore, although sattva guna showed a negative correlation, the relationship was not statistically significant. Nonetheless, this trend points to a potentially protective role of sattva guna. It is plausible that sattva guna may not only buffer against vicarious traumatization but also facilitate vicarious posttraumatic growth, which was not tested in the present study. Understanding this role could be of significant value, and future studies are encouraged to explore if sattva guna contributes to growth following exposure to secondary trauma, given sattva guna association with favourable life outcomes (Chauhan et al., 2020; Dhawan & Maini, 2022).

Implications for training and research practice

The findings of the present study have meaningful implications for both trainee therapists and qualitative researchers, particularly within the Indian context.

For trainee therapists, the moderate level of traumatization found highlights the need for training programs to move beyond a skill-based approach and to incorporate structured components for addressing the adverse impact of trauma work. More specifically, trainees may benefit through exposure to trauma-informed care practices that is often considered an essential component of alleviating distress emerging from trauma work (Sommer & Cox, 2006).

The significant relationship between triguna personality and vicarious traumatization suggests that perhaps consideration of personality differences in training could be considered as a valuable addition to the training. Moreover, incorporating the triguna framework may help trainees develop a culturally grounded understanding of their own emotional tendencies. For instance, a trainee high in rajas or tamas guna may benefit from targeted interventions such as grounding and reflective practices. Furthermore, the potential protective role of sattva guna highlights the importance of cultivating qualities such as emotional balance and clarity. Training institutions could consider integrating practices that enhance sattvic qualities, such as mindfulness-based interventions and yoga.

For researchers, the study's findings highlight the need to extend the conversation about occupational risk beyond the clinical setting to include researchers. To address the high risk, doctoral programs across the country should incorporate appropriate guidelines on managing the risks associated with trauma-focused research. Essential measures, such as training in reflexivity and boundary-setting, can be put in place to prevent the internationalization of participants' accounts. Furthermore, engaging in peer support groups, debriefing sessions with the supervisors, and access to counselling services for researchers may perhaps help mitigate the burden of trauma exposure.

Limitations and Future Direction

The study has several drawbacks. The small sample size limits the generalizability of the finding, and the use of self-report was another setback. Additionally, the cross-sectional design limits conclusions about causal direction. Future studies could adopt a longitudinal design to examine changes over time with a larger sample. Furthermore, the moderate reliability of the Triguna measures highlights the need for further validation and refinement of its psychometric properties.

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