

**TRAUMA AND COPING MECHANISMS AMONG  
ASSEMBLIES OF GOD MISSIONARIES**

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## ABSTRACT

The latest statistics on missionary attrition conclude that one in fourteen missionaries<sup>1</sup> leave the mission field each year and two-thirds of all missionary attrition is preventable (Hay et al. 2007b, 72). Robert Bagley's (2003, 104) study on missionary trauma finds that ninety four percent of the missionaries surveyed reported experiencing traumatic events, most multiple times within the past year. Numerous studies, performed with mission agencies and missionaries still on field, reveal various causes for missionary attrition. However, not one report analyzed the correlation between trauma and how missionaries coped with these traumatic events to produce low levels of Post-traumatic Stress Disorder (PTSD) and remain on field.

The purpose of this dissertation focuses on examining the effects of trauma and coping mechanisms of Assemblies of God World Missions (AGWM) missionaries in the regions of Africa, Asia, Eurasia, Europe, International Ministries, and Latin American and Caribbean, to create a theoretical foundation for the prevention of attrition and to enable well-being and longevity among missionaries. This research is unique in that it will investigate the coping skills utilized by missionaries who stayed on the foreign field after a traumatic event. A relationship between trauma and missionary coping will be expounded on in the ensuing areas: 1) a biblical overview of well-being despite trauma in Scripture and contemporary contexts; 2) the psychological issues resulting from trauma that could lead to attrition and their manifestation on

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<sup>1</sup> The term missionary or missionaries will refer to United States missionaries serving in a foreign context unless otherwise stipulated.

the missionary population; and 3) an examination of coping factors that minimize the negative impact of trauma. The study of these three areas will become the theoretical foundation for development of a theory to enhance AGWM missionary well-being, and when applied to missionaries it potentially can aid in lowering attrition.

In order to form a theory to enhance missionary well-being before, during, and after trauma, a questionnaire containing two sections was given to all AGWM missionaries in the regions of Africa, Asia, Eurasia, Europe, International Ministries, and Latin American and Caribbean. The first section contains the Trauma Event Questionnaire (TEQ) and the PTSD Checklist Civilian (PTSDC) to determine trauma experienced by AGWM missionaries and their level of PTSD at the time of the event and within the month prior to the survey. The second section will include the Brief Religious Coping Scale (B-RCOPE) (Spiritual coping skills), the Ego-Resiliency Scale (ERS) (Adventuresome character), the Resilience Appraisal Scale (RAS) (Social resiliency), the Resiliency Scale (RS) (General resiliency), the Calling and Vocation Questionnaire (CVQ) (Calling), and the Satisfaction with Life Scale (SWLS) will be utilized to understand missionary coping skills during and after trauma. The purpose is to determine what coping skills contribute to missionary hardiness and resilience. These participants will remain anonymous; however, they will be given the opportunity to volunteer to become part of the interview group. Non-threatening interviews will be conducted with on-field missionaries to ascertain what elements assisted in their remaining on field. Theological and psychological methodologies will be employed, along with the questionnaire and interview information, in

developing a comprehensive understanding of the relationship between trauma and coping which leads to missionary resilience.

Based on the information from the research, deductions about AGWM missionary's awareness of trauma and PTSD will be established, and elements for a theory of instituting missionary well-being in the wake of trauma for these missionaries will be clarified. To understand how to cope with trauma in a healthy way that can produce growth, one must fully comprehend the areas of trauma and coping.

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## CHAPTER 1: INTRODUCTION TO THE PROBLEM

As I lay face down on the cold, hard floor of our missionary apartment in El Salvador, a man held a gun to the back of my head as his three companions took away our meager possessions. Thankfully, the babies stayed asleep in spite of the clothes thrown upon them as the robbers looked for treasure. The three informed the last man to “take care” of us. However, as he left he whispered, “It is only because of your God” and shut the door. This story describes one of the many traumatic events DeLonn, my husband, and I faced during our thirty two-year missionary career. Yet we never once thought of leaving the field.

David Smith (changed name), a new missionary to the country of Honduras (changed location), sat in his new Speed the Light car waiting for the light to change at a busy intersection. A man ran up to his door, pointed a gun at him, and demanded the car. David opened the door and stepped out of the vehicle. The thief entered the automobile and left. The next week David and his family boarded a plane, leaving the land of their calling forever.

Trauma and life changes abound in the missionary career. Missionaries change culture and location frequently, leaving established friends and social structures behind. Often they reside in areas of civil unrest and endure life-threatening situations. When these intercultural ministers experience natural disasters, they must go beyond simply surviving to assisting the national church and the local community in rescue, survival, and recovery efforts. Often these situations reoccur over the course of the missionary’s career. Many missionaries can withstand

multiple stressors and not only survive but thrive. Sadly, others cannot manage the pressure, returning home with feelings of failure.

Attrition rates vary from study to study. Stanley Lindquist (1982, 22) reports as high as fifty percent attrition, mostly due to psychological trauma. Keri Barnett et al. (2005, 27) claims one career missionary in twenty (5.1%) leaves the field every year. Rob Hay (2007a, 216) lowers this number to one in fourteen. These cross-cultural workers walk away from their career for different reasons. Researchers consider acceptable attrition to include retirement, issues with children or stateside family, change of job, or health problems. Preventable or unacceptable attrition comprise lack of home support, interpersonal conflict (with nationals, co-workers, or agency), marital problems, emotional problems, lack of call, inadequate pre-field equipping/training, poor cultural adaptation, unfulfilled expectations, and low self-esteem/stress (Allen 1988, 421; Jones, 56; Taylor 1997b, 9-10).

Wycliffe Bible Translator's research into missionary attrition realizes that missionaries seldom admit the actual reason for leaving the field, and that even though stress could be seen as an element in the decision-making process; it seldom receives recognition as the tangible motive (Gardner 1988, 436-437). Nevertheless, stress is a constant companion to all cross-cultural workers. When missionaries take the Holmes/Rahe Stress Scale, they average six hundred points of stress per year. According to the scale, when a person reaches three hundred points of stress he or she has a high potential for physical illness (Schwandt and Moriarty 2008, 320-321). Lindquist affirms, "The combination of relational, spiritual, and occupational problems can create an environment of stress, which may eventually cause the missionary to leave the field." (1982, 320). Joanne Schwandt and Glendon Moriarty (2008, 320-321) maintain the stress and high demands of the missionary occupation, as well as, familial, physical, emotional, and

spiritual factors all contribute to increased attrition rates. The missionary reality of survival while facing trauma causes chronic stress. When the stress becomes unmanageable, destructive symptomatic responses ensue (Lindquist 1997, 243-244; Richardson 1992, 93).

This chapter will offer a synopsis of the problem intended for doctoral research, connecting the relationship between trauma and missionary coping skills in the lives of AGWM missionaries. The association of the author's background and interest in the subject will be investigated, along with communicating the study's proposed purpose, significance, and goals. To direct the range of the research, the problem statement and research questions will be introduced. The delimitations of the study, definitions of terms, and the author's assumptions will complete the chapter.

### **Background**

Called at age five, missions remains the focus of my life to this day. I always wanted to help people, so perusing a bachelor's degree in psychology seemed a logical choice. DeLonn and I served as missionaries with the Assemblies of God for the past thirty-two years. We spent twenty of those years in the country of El Salvador, living the first nine years in the midst of civil war.

During those years, I encountered many traumatic experiences involving war, gang-related violence, and natural disasters. However, traumatic events never seemed to bother me. I remained calm and never exhibited Post-traumatic Stress Disorder (PTSD). I thought this a normal response until I witnessed how fellow missionaries reacted to what I perceived as lesser traumatic episodes. For example, days after surviving an in-home armed robbery, a fellow missionary recounted the traumatization of his family when they had to move from one apartment to another in the same building.

The realization that people react differently to trauma made me curious as to what factors cause some missionaries to stay and others to leave the field. I contemplated that, with the knowledge of these reasons, counseling intervention could assist missionaries broken by crisis to remain on field. I desire to support missionaries, not only thorough the normal stress of missionary life but also in coping with inevitable traumatic situations. To prepare myself for this task, my post-graduate counseling Master's focused on trauma and PTSD.

### **Purpose**

The purpose of this study is to develop a theory for missionary well-being by examining the relationship between trauma and coping mechanisms among Assemblies of God World Mission (AGWM) missionaries.

### **Problem Statement**

The problem to be investigated in this study involves evaluating the experience and perceptions of trauma among AGWM missionaries and their coping abilities, by exploring the following three areas:

### **Research Questions**

1. What defines human well-being in and through traumatic experiences in biblical/theological contexts, and in what ways does this inform today's contemporary missionary?
2. What psychological issues related to trauma and coping impact missionary health and well-being?
3. What coping skills minimize the negative impact of trauma in missionaries' lives and enhance AGWM missionary well-being?

### **Significance of the Study**

The significance of this research will be as follows:

- 1) This study will relate to the call God placed in my heart to assist missionaries in times of trauma. The results of this research will better prepare me to educate missionaries for the trauma they might face in their field of service, and give wise counsel after a crisis event.
- 2) Understanding how missionaries cope with traumatic experiences could possibly assist AGWM in promoting missionary well-being. Tools such as pre-field trauma education, crisis management, trauma response teams, short-term counseling, etc. could be recommended to better fortify AGWM's member care system.
- 3) Much of the previous research in the area of missionary trauma focused on the amount of trauma missionaries endured or the reasons for missionary stress. To date, no research has concentrated on coping skills leading toward missionary well-being. This coping component can lead toward better member care for missionaries on field.

### **Goals**

The goals of this study include:

- a description of appropriate coping that can assist missionaries as they struggle with trauma they may encounter while serving on field by: 1) articulating a theology of well-being as seen in the lives of biblical characters; 2) identifying the secular and religious insights into trauma, coping and well-being; and 3) investigating the trauma AGWM missionaries endure and what coping skills they utilize to remain healthy in their field of service.
- the enumeration of coping tools to fortify AGWM's member care system.

### **Limitations and Delimitations**

In the survey research, I realize my personal ability to maintain well-being in spite of traumatic experiences and remain on field may bias my interpretation of the data. It may also be difficult to measure missionaries' levels of trauma and PTSD with what may be years separating them from the original field trauma. With no theology of well-being in existence, this research should be viewed as an endeavor at theological expression. Psychological research into the effects of trauma on the general population continues to expand; however, few studies touch the unique missionary population.

Missionary trauma can happen in any country and be caused by many variables. This research will be limited to missionaries serving with AGWM in the regions of: Africa, Asia, Eurasia, Europe, International Ministries, and Latin American and Caribbean, and will focus on what missionaries consider traumatic experiences in their lives and how they coped with these events. This does not infer that other types of trauma or crisis do not also produce missionary stress and attrition.

### **Definitions**

A definition for each key term in this study follows:

Anxiety – “The apprehensive anticipation of future danger or misfortune accompanied by a feeling of worry, distress, and/or somatic symptoms of tension. The focus of anticipated danger may be internal or external” (American Psychiatric Association 2013, 818).

Assemblies of God (AG) – A Pentecostal denomination formed in the United States in 1914, as a cooperative fellowship of ministers and congregations, for the purpose of doctrinal integrity and missional activity (Rance 1999, 7).

Assemblies of God World Missions (AGWM) – Founded in the same 1914 meeting as the denomination, the AGWM continues its engagement in the missionary endeavor to evangelize the world through its Bible-based, Spirit-empowered, and Christ-centered message. AGWM's methodology stands on the four biblical pillars of: reaching, planting, training, and serving (AGWM n.d.).

Attrition – The English term as it applies to mission service refers simply to the departure from field service by missionaries, regardless of cause (Taylor 2002, 69).

Burnout – “A psychological strain representing a process of the depletion of personal coping resources in reaction to prolonged exposure to stress at work” (Solcova and Kebza 2011, 64).

Coping – “The on going transactional process between (a person's) environment, a process impacted by both cognitive appraisal and coping behavior” (Maynard, Gorsuch, and Bjorck 2001, 65).

Depression (or depressivity) – A psychological disorder involving the body, mood, and thoughts. “Feelings of being intensely sad, miserable, and/or hopeless. Some patients describe an absence of feelings and/or guilt; feelings of inferior self-worth; and thoughts of suicide and suicidal behavior” (American Psychiatric Association 2013, 820).

Hardiness - This allows a person to take the crisis elements and, with control and commitment, have the ability to find meaning, personal development, purpose, and the belief that he or she has the power to change the outcome (Arndersson Arnten, Jansson, and Archer 2008, 140-141; Eschleman, Bowling, and Alarcon 2010, 278).

Member care – Consists of the preparation, equipping, and empowering of missionaries for effective and sustainable life, ministry, and work. It addresses all aspects of missionary well-

being (i.e., spiritual, emotional, relational, physical, and economic). The responsibility for member care resides with the sending agency, the sending church, the receiving church, leadership (home and field), the team, families, and the individual missionary themselves (Mobile Member Care n.d.).

Post Traumatic Stress Disorder (PTSD) – Listed as a Trauma and Stressor-Related Disorder in the *Diagnostic and Statistical Manual of Mental Health Disorders* (DSM-5), PTSD affects a person’s memory, emotional responses, intellectual processes, and nervous system due to one or more traumatic experiences. To diagnose PTSD the following criteria must be exhibited: exposure to one or more traumatic events, re-experiencing of the event, psychic numbing and avoidance, symptoms of increased arousal, and duration of symptoms for four weeks or longer (American Psychiatric Association 2013, 217-280).

Resilience – “The ability ... to maintain relatively stable, healthy levels of psychological and physical functioning ... as well as the capacity for generative experiences and positive emotions” (Bonanno and Mancini 2006, 42).

Stress – “The pattern of specific and nonspecific responses a person makes to stimulus events that disturb his or her equilibrium and tax or exceed his or her ability to cope” (American Psychiatric Association 2013, 829).

Trauma – Trauma involves a sudden and life-threatening event, which produces painful memories that overwhelms one’s ability to cope (Figley and Figley 2009, 173).

Well-being – “Well-being includes the presence of positive emotions and moods (e.g., contentment, happiness), the absence of negative emotions (e.g., depression, anxiety), satisfaction with life, fulfillment and positive functioning...In simple terms, well-being can be

described as judging life positively and feeling good” (Center for Disease Control and Prevention 2014).

### **Assumptions**

With the available data indicating the quantity of traumatic events missionaries experience, and the high attrition rates reported by mission agencies, I assume a correlation between high trauma/low PTSD and coping mechanisms. A missionary’s success on field directly links with his or her resilience and well-being; hence, proper member care will aid in missionary retention. This research will ascertain the validity of these assumptions.

CHAPTER 2:  
ANNOTATED BIBLIOGRAPHY/LITERATURE REVIEW

The psychological academy frequently researches the issues of trauma and PTSD, yet relevant research on missionary attrition due to trauma seems almost non-existent. Investigation led to only one study on the relationship between trauma and missionary attrition by Bagley (2003), and he only surveyed 31 Wesleyan missionaries, leading to an unreliable sample. Lack of research constitutes gaps in knowledge related to this topic. This chapter will review the precedent literature on trauma and missionary attrition that will assist in answering the three research questions: 1) What defines human well-being in and through traumatic experiences in biblical/theological contexts, and in what ways this inform today's contemporary missionary contexts?, 2) What Psychological Issues Related to Trauma and Coping Impact Missionary Health and Well-being?, and 3) What Coping Skills Minimize the Negative Impact of Trauma in Missionaries' lives and Enhance AGWM Missionary Well-being?, and will conclude by identifying literature that will support the methodologies chosen for the original research.

**RQ1: What defines human well-being in and through traumatic experiences in biblical/theological contexts, and in what ways does this inform today's contemporary missionary?**

The biblical text relates many stories about human beings overcoming traumatic events. Noah built an ark, per God's instruction, and then witnessed the total destruction of the world, Moses murders a man, wonders in the desert, and through him, God sends many natural disasters

to force Pharaoh to release the Israelites from slavery. Sold into slavery by his brothers, Joseph overcame betrayal, abuse, and imprisonment to become second in command in Egypt. Daniel lived through captivity, slavery and near death from hungry lions. Yet these biblical characters and many others lived through multiple traumatic events, preserved, and in many ways thrived. This dissertation tutorial will investigate twenty-three biblical characters. However, for this annotative bibliography a sample of these characters: Job, Jonah, and Paul will be used to extrapolate a biblical overview of well-being despite the trauma each of these people faced. In the dissertation many more key biblical characters will be examined to discover the components of well-being as seen in their life stories.

### Job

**Kierkegaard, Soren.** 1990. "The Lord Gave, and the Lord Took Away. Blessed be the Name of the Lord." In *Eighteen Upbuilding Discourses*, ed. Hong, Howard V, and Edna H. Hong, Princeton: Princeton University Press.

Whether Job was a real person or a character in a Hebraic poem, his story of suffering and trauma resonates in each human reader. This chapter depicts Job as a representation of humanity; proving there can be triumph in the center of anguish.

**Mathews, Susan.** 2001. "All For Not: My Servant Job." in *The Bible on Suffering: Social and Political Implications*. ed. Anthony Tambasco, 51-71. New York: Paulist Press.

Mathews claims that the narrative of Job does not resolve the dilemma of suffering but "illustrates what a person of integrity does in the face of it: cling to God in faith and continue to serve God for nothing save that relationship" (68).

**Verbin, N.** 2010. *Divinely Abused: A Philosophical Perspective on Job and His Kin*. New York: Continuum International Publishing Group.

Verbin examines the abuse of suffering and concludes that when one perceives pain as “afflictions of love” from God who encompasses all aspects of his or her life, healing can happen (77).

### Jonah

**Bolin, Thomas.** 1997. *Freedom Beyond Forgiveness: The Book of Jonah Re-Examined*. Sheffield, England: Sheffield Academic Press.

Bolin examines the connection between God and human beings in Jonah’s story. God becomes involved in human suffering and sometimes utilizes woe to correct and bring about character transformation.

**McKenzie, Steven.** 2005. *How to Read the Bible: History, Prophecy, Literature - Why Modern Readers Need to Know the Difference and What it Means for Faith Today*. Oxford: Oxford University Press.

McKenzie contends that readers must understand the personhood of each biblical author, how these authors comprehended the letters they wrote, and how each intended audience understood the texts. He includes a very interesting summary of the book of Jonah and gives insight into this biblical personality’s character. This will help in ascertaining how Jonah prevailed over the trauma of his near death experience.

**Timmer, Daniel.** 2011. *A Gracious and Compassionate God: Mission, Salvation and Spirituality in the Book of Jonah*. Downers Grove: InterVarsity Press.

Many theologians claim Jonah to be fictitious, however, a study of this Old Testament missionary will be enlightening. Timmer looks at the historical background of the book of Jonah and gives a glimpse of Jonah the man who found himself in a traumatic situation because of his disobedience.

## Paul

**Barnett, Paul.** 2008. *Paul Missionary of Jesus*. Grand Rapids: William B. Eerdmans Publishing Company Biblical

Barnett chronicles the life and journeys of Paul. He claims Paul perceived his hardships and sufferings as an expression of his love for the Lord and solidarity in Christ's suffering.

**Clinton, Timothy, Archibald Hart, and George Ohlschlager.** 2005. *Caring for People God's Way: Personal and Emotional Issues, Addictions, Grief, and Trauma*. Nashville: Thomas Nelson, Inc.

Clinton explains that not only did Paul have trauma and crisis; he also had a thorn in the flesh that caused him chronic torment. In spite of Paul's repeated pleading for its removal, God did not relieve Paul from his suffering. Instead he taught Paul to embrace unavoidable trauma and trust that God's sovereignty would bring about Paul's growth and the Lord's glory.

**Fee, Gordon.** 1994. *God's Empowering Presence: The Holy Spirit in the Letters of Paul*. Peabody: Hendrickson Publishers.

Even though many biblical theologians write about the life and works of the Apostle Paul, very few focus on the effects of the traumatic events he recounts in 2 Corinthians. Fee does this and his exegesis of the Scripture gives a full picture of Paul's suffering.

**O'Donnell, Kelly,** ed. 1992. *Missionary Care: Counting the Cost for World Evangelization*. Pasadena: William Carey Library.

O'Donnell mentions that like the first missionary Paul went through trauma, so will the modern day missionary. He speaks to Paul's stress and trauma claiming Paul preserved because of his personal dependence on God and the collective prayers of the church.

**Roetzel, Calvin.** 1999. *Paul: The Man and the Myth*. Minneapolis: Fortress Press.

Roetzel draws a portrait of Paul the man from his letters and other historical stories. He examines the suffering Paul went through and how these events affected his character. Roetzel

mirrors the same opinion as Barnett and Fee that even through repeated trauma, Paul viewed it all as his participation in the death of Jesus.

**Giron, Rodolfo.** 1997. "An Integrated Model of Missions." in *Too Valuable to Lose: Exploring the Causes and Cures of Missionary Attrition*. ed. William Taylor, 24-40. Pasadena: William Carey Library.

Giron touched on the missiological perspective of Paul's traumatic missionary career. He comments on the time Paul spent in Caesarea and Tarsus as the most hardship racked time in his life.

### **RQ2: What Psychological Issues Related to Trauma and Coping Impact Missionary Health and Well-being?**

Bagley details that 94% of the missionaries he surveyed stated being exposed to at least one traumatic episode during their missionary career, with 65% exposed to a crisis incident within their most recent year of service, and 42% of those indicating exposure to more than one event (2003, 104). Surprisingly, even with this high rate of traumatic exposure, few missionaries reported PTSD symptoms. This research tutorial will examine the historical growth of the psychological and physical issues of trauma and coping and how these subjects interfere or assist with missionary well-being.

**American Psychiatric Association.** 2013. *Diagnostic and Statistical Manual of Mental Disorders (DSM-5)*. Washington, DC: American Psychiatric Publishing.

All psychological disorders related to trauma can be found in the DSM-5. This will be an important tool to explain each disorder and to understand how to diagnose them.

**Bagley, Robert.** 2003. "Trauma and traumatic stress among missionaries." *Journal of Psychology and Theology* 31, no. 2: 97-112.

Missionaries seem to be more resilient to trauma than the average North American population. Bagley gives several suggestions to this phenomenon. First, the prolonged stress and

trauma allows missionaries to develop stronger resilience and hardiness. Also, missionaries chose their career and recognize the dangers involved; therefore, when trauma occurs, they express more determination and resiliency. Lastly, missionaries have a strong religious commitment; hence, in times of trouble they draw from their spiritual resources. This spiritual component can react negatively on missionaries however, as they can deny PTSD symptoms because of its inconsistency with their concept of spirituality.

**Bonanno, George A.** 2004. "Loss, trauma, and human resilience: Have we underestimated the human capacity to thrive after extremely aversive events?" *American Psychologist* 59, no. 1: 20-28.

**Bonanno, George A.** 2005. "Resilience in the face of potential trauma." *Current Directions in Psychological Science* 14, no. 3: 135-149.

**Bonanno, George A., and Anthony D. Mancini.** 2006. "Bereavement-Related Depression and PTSD: Evaluating Interventions." in *Psychological Interventions in Times of Crisis*, ed. Barbanell, Laura, and Robert Sternberb, 37-55. New York: Springer Publishing Company.

**Bonanno, George A., Ruth Pat-Horenczyk, and Jennie Noll.** 2011. "Coping flexibility and trauma: The perceived ability to cope with trauma (PACT) scale." *Psychological Trauma: Theory, Research, Practice, and Policy* 3, no. 2: 117-129.  
doi:10.1037/a0020921

George Bonanno continues to research human beings ability to cope with trauma. These articles investigate how people not only cope but overcome traumatic events. In 2011, Bonanno developed a scale to determine a person's coping flexibility in light of differing potential traumatic life events called the Perceived Ability to Cope with Trauma (PACT) Scale (Bonanno et al. 2011). This scale may be valuable in the research portion of this dissertation.

**Beste, Jennifer.** 2007. *God and the Victim: Traumatic Intrusions on Grace and Freedom*. New York: Oxford University Press.

Beste looks at how trauma can damage one's concept of God's grace. She does believe that loving, personal relationships with friends and family can build a bridge for the trauma

survivor to return to his or her connection with God. Missionaries can at times doubt God, but they must learn to trust Him during these trying times.

**Bussey, Marian and Judith Wise**, eds. 2007. *Trauma Transformed: An Empowerment Response*. New York: Columbia University Press.

Bussey views three key issues in trauma transformation. 1) How people move toward healing after trauma. 2) How a survivor uses interpersonal dynamics to grow during crisis events. 3) Through narrative, Busses reveals healing resiliency created by society and community. Understanding how one copes and the importance of community during traumatic events can help the missionary stay on field.

**Calhoun, Lawrence**. 2006. "The Foundations of Posttraumatic Growth: An Expanded Framework." in *The Handbook of Posttraumatic Growth: Research and Practice*, ed. Calhoun, Lawrence, and Richard Tedeschi, Mahwah, NJ: Laurence Erlbaum Associates.

Calhoun discovered multiple traumatic events, under certain conditions, actually strengthen resilience, causing emotional and spiritual growth. People tend to have the ability to weather trauma and incorporate its scars to become better individuals.

**Carr, Karen, and Frauke Schaefer**. 2010. "Trauma and traumatic stress in cross-cultural missions: How to promote resilience." *Evangelical Missiological Society* 46, no. 3: 278-285.

To withstand trauma, missionaries need the encouragement of others, the most essential being spousal support. Carr and Schaefer suggest marital satisfaction curtails the severity of posttraumatic stress. A healthy theology of suffering also impedes the negative impact of trauma.

**Cousineau, Amy et al.** 2007. "The 16PF and marital satisfaction inventory as predictors of missionary job success." *Journal of Psychology and Theology* 35, no. 4: 317-327.

Like Carr and Schaefer, Cousineau found that one's personality and a happy marriage helped a missionary succeed on field.

**Foyle, Marjory.** 2001. *Honorably Wounded: Stress Among Christian Workers*. London: Monarch Books.

Foyle deals with the effects of stress in the missionary population. She maintains one of the greatest missionary stressors concerns their being worthy of financial support. Not only do missionaries contend with the feeling of being a beggar, they also endeavor to maintain a living standard subordinate to their humblest supporter, and exert more effort than their most workaholic supporter.

**Hay, Rob et al.** eds. 2007. *Worth Keeping: Global Perspectives on Best Practice in Missionary Retention*. Pasadena: William Carey Library.

One of the newest works on missionary retention, and the original REMAP study will also be invaluable in this research. Both evaluate missionary effectiveness and retention showing the importance of assisting missionaries in learning coping skills so that they can face adversity and cross-cultural stress in a positive way. They urge agencies to become more involved in this aspect of member care.

**Gardner, Laura Mae.** 1992. "Crisis Intervention in the Mission Community." in *Missionary Care: Counting the Cost for World Evangelization*. ed. Kelly O'Donnell, 136-150. Pasadena: William Carey Library.

Gardner speaks to the multiple crisis missionaries face, including cultural, personal, natural disasters, and political turmoil.

**Irvine, Julie, David Armentrout, and Linda Miner.** 2006. "Traumatic stress in a missionary population: Dimension and impact." *Journal of Psychology and Theology* 34, no. 4: 27-336.

Missionaries tend to undergo more traumatic situations than the average North American person. Acculturative stress compounds this trauma, which caused many missionaries to leave the field broken and disillusioned.

**Janoff-Bulman, Ronnie.** 1992. *Shattered Assumptions: Towards a New Psychology of Trauma.* New York: The Free Press.

Janoff-Bulman examines how trauma destroys a person's fundamental assumptions about the world and his or her personal meaningfulness. Missionaries need to comprehend this and realize that they find their purpose in God, especially in difficult times.

**Jones, Marge.**1995. *Psychology of Missionary Adjustment.* Springfield, MO: Logion Press.

Jones investigates many psychological issues missionaries face. She asserts missionaries who attrite do so because of lack of internal or psychological adjustment to a problematic situation. She identifies stress that stems from loneliness, cultural adjustment, demands on time, lack of medical care, overwhelming workload, role confusion, pressure to be positive, and no recreation, to be the main reason for first term attrition.

**McCann, Lisa, and Laurie Anne Pearlman.** 1990. *Psychological Trauma and the Adult Survivor: Theory, Therapy, and Transformation.* New York: Brunner/Mazel.

McCann and Pearlman define psychological trauma and explain an individual's emotional, cognitive, biological, behavioral, and interpersonal response patterns. Understanding these responses is important for missionary retention.

**Myers, David G.** 1992. *The Pursuit of Happiness: Discovering the Pathway to Fulfillment, Well-being, and Enduring Personal Joy.* New York: Quill.

Myers investigates popular myths concerning the keys to happiness. He then goes on to explain methods in how to secure joyous living. Missionaries must find that place of joy even in the midst of a storm.

**O'Donnell, Kelly,** ed. 1992. *Missionary Care: Counting the Cost for World Evangelization.* Pasadena: William Carey Library.

**O'Donnell, Kelly, and Michele O'Donnell,** eds. 1988. *Helping Missionaries Grow: Readings in Mental Health and Missions.* Pasadena: William Carey Library.

These two seminal works of Kelly and Michelle O'Donnell look at missionary psychopathology. O'Donnell and O'Donnell compartmentalize missionary stress into five areas: cultural, human, organizational, physical, and psychological.

**Pulley, Mary Lynn, and Michael Wakefield.** 2001. *Building Resiliency: How to Thrive in Times of Change*. Greensboro: Center for Creative Leadership.

Pulley embarks on a journey to understand the concept of resiliency and then assists people in developing a resilient nature. To have longevity on field, missionaries must be resilient in an ever changing and demanding lifestyle.

**Richardson, Jarrett.** 1992. "Psychopathology in Missionary Personnel" in *Missionary Care: Counting the Cost for World Evangelization*. ed. Kelly O'Donnell, 89-109. Pasadena: William Carey Library.

Richardson claims depression as the most common psychopathology in missionaries. He also sites burnout as a common missionary malady. Missionaries must be able to recognize the signs of depression and burnout and have a grasp of how to find help to heal them.

**Schaefer, Frauke et al.** 2007. "Traumatic events and posttraumatic stress in cross-cultural mission assignments." *Journal of Traumatic Stress* 20, no. 4: 529-539. doi:10.102/jcs.20240.

**Schaefer, Frauke, Dan Blazer, and Harold Koenig.** 2008. "Religious and spiritual factors and the consequences of trauma: A review and model of the interrelationship." *International Journal of Psychiatry in Medicine* 38, 507-524.

Both articles by Schaefer et al. consider missionaries strong sense of purpose and call contribute to their low rate of psychopathology in the face of trauma. This dissertation will also look at call as a possible factor in missionary resiliency.

**Taylor, William,** ed. 1997. *Too Valuable to Lose: Exploring the Causes and Cures of Missionary Attrition*. Pasadena: William Carey Library.

This first REMAP survey showed the top three preventable reasons for missionary attrition consisted of: children, low self-esteem/stress, and problems with co-missionaries. They

found maintaining good relationships with co-workers, family, and leadership prevented attrition. Interestingly, the second REMAP (Hay et al. 2007) survey produced the same three reasons for preventable attrition. A surprising finding however, revealed a person's previous cross-cultural experience and past ability dealing with negative events did not have any bearing on retention.

**Van der Kolk, Bessel.** 1987. *Psychological Trauma*. Washington, DC: American Psychiatric Press.

Van der Kolk's book looks at psychological significance of life crises. It explains how the body responds to traumatic events. This basic overview of trauma will be very helpful in understanding its pathology and development.

**Van der Kolk, Bessel, Alexander C., McFarlane, and Lars Weisaeth.** 1996. *Traumatic Stress: The Effects of Overwhelming Experience on Mind, Body, and Society*. New York: Guilford Press.

This seminal work establishes the criteria needed to diagnose posttraumatic stress disorder. Van de Kolk and associates also discuss reasons as to why some individuals cope better than others, PTSD symptomology, and successful therapeutic interventions

### **RQ3: What Factors Minimize the Negative Impact of Trauma in Missionaries' lives and Enhance AGWM Missionary Well-being?**

With the majority of missionaries experiencing trauma, many experts recommend several forms of member care to minimize traumas negative effects. Interventions include the non-formal care of husband/wife and fellow field missionary support to the formal care of a counseling professional. Many experts suggests trauma education begin at pre-field orientations and then reinforced with on field education, and post-trauma counseling such as Critical Incident

Stress Debriefing (CISD). This research tutorial will consider the many options of trauma intervention.

The already mentioned, Bagley (2003), Carr et al. (2010), Schaefer et al. (2007), Cousineau et al. (2007), Irvine et al. (2006), Jones (1995), O'Donnell (1992), and Taylor (1997) all have insight into which interventions assist missionary retention. Bagley (2003) sees the need for psychological intervention such as CISD after exposure to traumatic events. Irvine et al. (2006) stress the importance of pre-field training and Jones (1995) emphasizes the need for qualified counselors with missionary experience to visit each missionary during their first year of service. She maintains psychological intervention, at the first sign of a problem, can reduce attrition. O'Donnell (1992) views member care as an ethical necessity, unlike some who perceive it as a distraction that actually makes missionaries less resilient and effective. Kelly O'Donnell's chapter, "Member Care on the Field: Taking the Longer Road," in Taylor (1997) concludes that counseling, whether done by professionals, friends, family, or journaling, is vital to missionary well-being and should be required for both the sick and the healthy.

**Allen, Jon.** 1999. *Coping with Trauma: A Guide to Self-Understanding*. Washing, DC: Psychiatric Press.

Allen helps survivors cope with traumatic incidents by explaining how this crisis affects their body, mind, and family life. He also assists the friends and families to empathize with the victims.

**Bandura, Albert.** 1995. *Self-Efficacy in Changing Societies*. Cambridge: Cambridge University Press.

Bandura realized that when people believe they can overcome problems they usually succeed at life. This phenomenon he called self-efficacy.

**Barbanel, Laura and Robert Sternberb.** 2006. *Psychological Interventions in Times of Crisis*. New York: Springer Publishing Company.

Barbanel and Sternberb tackles the debates over wither interventions after a traumatic event actually help victims succeed in overcoming crisis. They use stories of what psychologists have used in different worldwide disasters.

**Bonanno, George. A., Camille. B. Wortman, Darrin. R. Lehman et al.** 2002. Resilience to Loss and Chronic Grief: A Prospective Study from Pre-Loss to 18 Month Post-Loss. *Journal of Personality and Social Psychology* 83, no. 5: 1150-1164. doi. 10.1037//0022-3514.83.5.1150.

Bonanno and associates found that the help of friends assisted people in the loss of spouses, partners, and children. The bereaved suffer fewer disruptions and can look at the future more positively with this assistance.

**Calhoun, Lawrence G., and Richard G. Tedeschi.** 1999. *Facilitating Posttraumatic Growth: A Clinician's Guide*. Mahwah, NJ: Erlbaum.

Calhoun and Tedeschi first coined the term posttraumatic growth and this seminal work describes this experience of thriving after trauma. The authors discovered that some people become stronger after crisis. This book offers strategies to bring about this constructive change.

**Carr, Karen.** 1994. "Trauma and post-traumatic stress disorder among missionaries: How to recognize, prevent, and treat it." *Evangelical Missions Quarterly* 30, 246-255.

Carr calls for a strategic member care plan that is proactive and preventative. She goes on to say member care should include: interpersonal skills, conflict management, team building, marriage enrichment, crisis preparation, stress management, pastoral care, and counseling interventions.

**Clinton, Timothy, Archibald Hart, and George Ohischlager.** 2005. *Caring for People God's Way: Personal and Emotional Issues, Addictions, Grief, and Trauma*. Nashville: Thomas Nelson, Inc.

This book portrays a system of Christian counseling that assists therapists in the areas of trauma, loss, grief and suicide.

**Joseph, Stephen.** 2011. *What Doesn't Kill Us: The New Psychology of Posttraumatic Growth*. New York: Basic Books. Original edition, Kindle.

After researching trauma survivors, Joseph realized that many not only survived the crisis but became better people. Thus proving the old adage he used for the title of his book, “What doesn't kill us makes us stronger.”

**Lazarus, Richard S.** 1966. *Psychological Stress and the Coping Process*. New York: McGraw-Hill Book Company.

**Lazarus, Richard S., and Susan Folkman.** 1984. *Stress, Appraisal, and Coping*. New York: Springer.

These classic works by Lazarus and Folkman examine psychological stress and address the ideas of cognitive appraisal and coping. They look into the areas of emotional stress, stress management, life span development, and treatment.

**Pargament, Kenneth I.** 1997. *The Psychology of Religion and Coping: Theory, Research, Practice*. New York: Guilford Press.

Decades of research resulted in this work by Paragament. He addresses the area of religious coping and its assistance or hindrance in ones coping ability after trauma.

**Rambo, Shelly.** 2010. *Spirit and Trauma: A theology of Remaining*. Louisville: Westminster Jons Knox Press.

Rambo considers the Christian concept of suffering and resurrection to be the redeeming quality of trauma. The Holy Spirit, with divine love, walks with the sufferer through the crisis to recovery.

**Tedeschi, Richard, and Lawrence Calhoun.** 1995. *Trauma and Transformation: Growing in the Aftermath of Suffering*. Thousand Oaks, CA: Sage Publications.

**Tedeschi, Richard G., Crystal L. Park, and Lawrence G. Calhoun.** eds. 1998. *Posttraumatic Growth: Positive Changes in the Aftermath of Crisis*. Mahwah, New Jersey: Lawrence Erlbaum Associates, Publishers.

Both of these books look at posttraumatic growth from the research of Tedeschi, Park, and Calhoun. In the past, psychology only looked at the negative effects of trauma. These authors explain the coping process and propose ways that survivors can overcome their fears and make good life changes.

**Wilson, J.P., M.J. Friedman, and J.D. Lindy,** eds. 2001. *Treating Psychological Trauma and PTSD*. New York: The Guilford Press.

Wilson, Friedman, and Lindy bring together experts on treating trauma and PTSD. These authors examine the most holistic diagnosis protocol and effective treatment for this malady of extreme trauma.

### **Methodological Research Literature**

**Bernard, Russell H.** 2006. *Research Methods in Anthropology: Qualitative and Quantitative Approaches*. New York: Altamira Press.

This standard textbook for research methods classes explains qualitative and quantitative research procedures. Since surveys and interviews will be used, this book must be examined to execute these procedures.

**DeVellis, Robert F.** 2012. *Scale Development: Theory and Applications*. Thousand Oaks, CA: Sage Publications.

This book overviews the areas of research measurements, variables, reliability, validity, scale development, factor analysis, item response theory, and updates of existing measurement scales.

**Mertler, Craig A., and Rachel A. Vannatta.** 2009. *Advanced and Multivariate Statistical Methods*. 4<sup>th</sup> ed. New York: Pyrczak Publishing.

This book assists students in interpreting and presenting the results of original research. It also teaches students on how to use SPSS software for computing survey data.

This short list of research material will start the journey of discovery into the area of missionary trauma and coping. An investigation into the lives of twenty-three biblical characters will lay the foundation of what biblical coping should look like. Seminal authors such as Bonanno, Calhoun, Carr, Janoff-Bulman, Hay and Wilson, Lazarus and Folkman, O'Donnell and O'Donnell, Pargament, Tedeschi and Calhoun, and Van der Kolt will start the exploration into the areas of trauma, PTSD, coping, resilience, and posttraumatic growth. The dissertation literature review will build a foundation for the original research to develop a theory for missionary coping.

## CHAPTER 3: RESEARCH METHODOLOGY

The methodology for this study will be a combination of survey, interviews, and psychological research in the area of trauma and coping mechanisms. Data will be collected in primary documents and through a questionnaire and interviews with AGWM missionary personnel. Figure 2.1 (p. 10) renders a conceptual flow chart of methodological considerations. Figure 2.2 (p. 11) depicts a conceptual diagram of research exemplifying the relationship between research questions, the tutorials, and the integrating theme.

### **Theological Research – RQ1**

Theological Research investigates the appropriate responses to trauma in the biblical/theological context. This biblical view of well-being in the midst of trauma will benefit AGWM missionaries who have lived or will go through traumatic experiences.

### Data Collection

Data will be collected by exploring biblical characters in the middle of stress and trauma in relevant primary literature, including books and articles. Clues should come to light as to how these ancient personalities persevered and moved from anxiety to well-being. The Bible and biblical commentaries will be the primary literature.

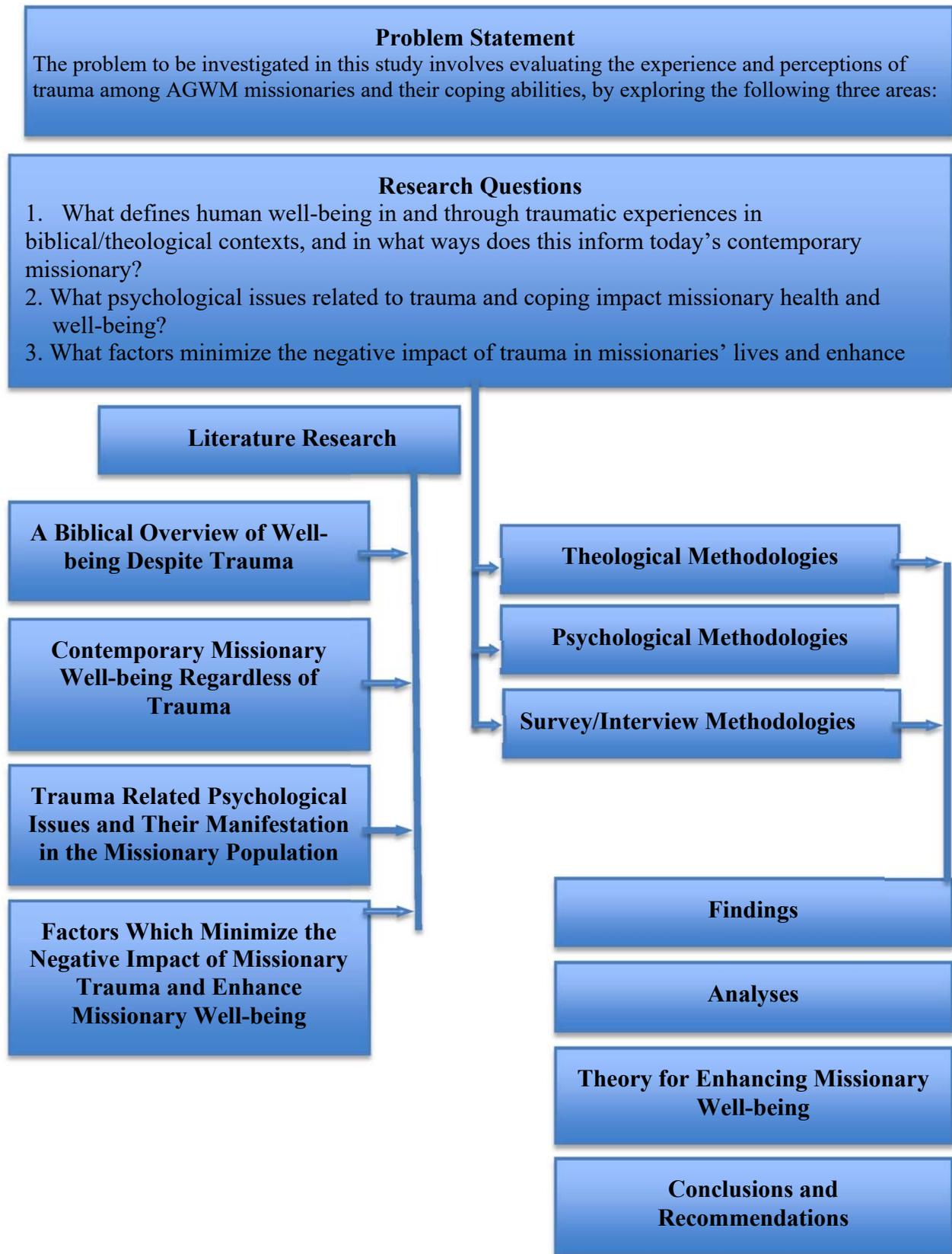
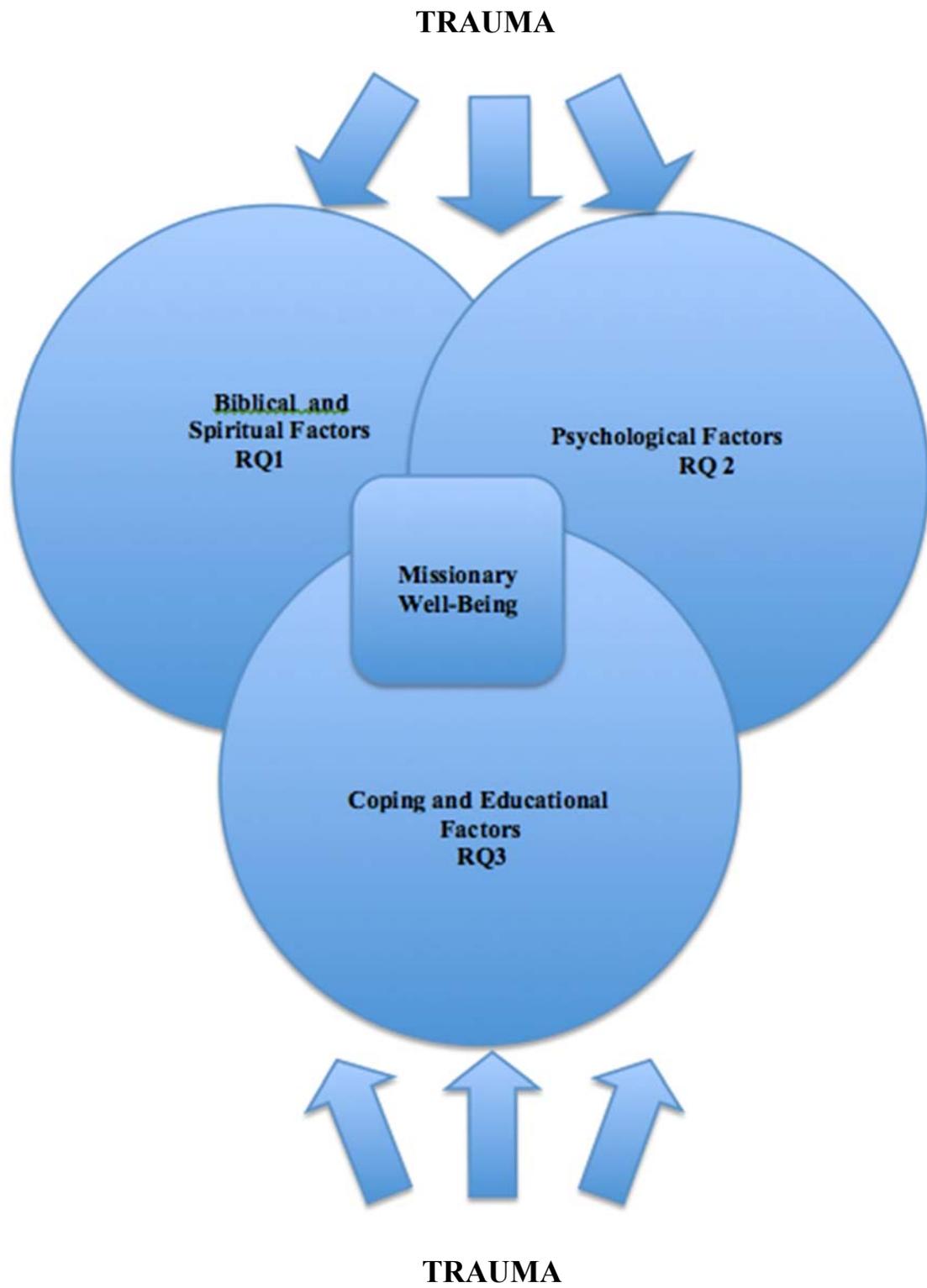


Figure 3.1. Conceptual Flow Chart of the Methodology



**Figure 3.2.** Conceptual Diagram of the Research

### Data Analysis

A theology of well-being will surface through analyzing the theme of stress and trauma in the lives of missional biblical characters. Appropriate hermeneutics will be applied to reveal psychological truths in the stories studied.

### **Psychological Research – RQ2**

Psychological research will delve into the areas of stress and trauma development, coping, and education and their influences on the lives of AGWM missionaries. The distinct lifestyle of the missionary will bring a unique lens to the subject of stress and trauma.

### Data Collection

This data will be gleaned from primary psychological resources in the area of stress and trauma. Peer reviewed articles will also provide up-to-date research in this field. Literature in the area of missionary stress and trauma will also be perused.

### Data Analysis

The psychological data will be scrutinized to establish a link between trauma development, coping, education, and the missionary's sense of well-being.

### **Survey/Interview Research – RQ3**

In order to determine AGWM missionary well-being, missionary stress, trauma, and coping skills will be measured through the use of empirical research. A survey will be given to all AGWM missionaries in the regions of: Africa, Asia, Eurasia, Europe, international ministries, and Latin America and Caribbean. The purpose is to determine what coping skills contribute to missionary hardiness and resilience. These participants will remain anonymous; however, they will be given the opportunity to volunteer to become part of the interview group. Non-

threatening interviews will be conducted with on-field missionaries to ascertain the utilization of biblical, spiritual, and psychological coping factors in the well-being process.

### Data Collection

Empirical data related to AGWM missionary well-being in spite of stress and trauma will be gathered through the use of a trauma questionnaire and interview. The survey will consist of two parts: The first section will comprise the Trauma Event Questionnaire (TEQ) and the PTSD Checklist Civilian (PTSDC) to determine trauma experienced by AGWM missionaries and their level of PTSD at the time of the event and within the past month. The second section will include the Brief Religious Coping Scale (B-RCOPE) (Spiritual coping skills), the Ego-Resiliency Scale (ERS) (Adventurous character), the Resilience Appraisal Scale (RAS) (Social resiliency), the Resiliency Scale (RS) (General resiliency), the Calling and Vocation Questionnaire (CVQ) (Calling), and the Satisfaction with Life Scale (SWLS) will be utilized to understand missionary coping skills during and after trauma. This survey will be sent to around 1,000 AGWM missionaries currently serving on field to determine their traumatic incidents and PTSD levels. With this information, non-threatening interviews will be conducted with ten to fifteen on-field missionaries to ascertain what biblical, spiritual, and psychological coping factors assisted in their well-being, allowing them to remain on field.

### Data Analysis

The data will be analyzed as a multi-variant analysis pertinent to the corresponding research questions. The foreseen results of the survey should assess the missionary's perceived trauma/PTSD level. The coping skills of missionaries with high trauma/low PTSD should indicate good coping mechanisms that achieve well-being. The coping abilities of missionaries with low trauma/high PTSD should suggest poor coping capabilities that could lead to

psychological pathology and attrition. The corresponding interviews should distinguish patterns of well-being in the areas of theology, spirituality psychology, coping, and education (or lack thereof). These findings will aid in producing a theory of missionary well-being that will help missionary agencies with unacceptable missionaries' attrition.

## CHAPTER 4: FINDINGS

The findings that will arise out of the biblical, psychological, and survey/interview research will be presented in three chapters corresponding to the research questions. The first chapter of findings will develop a theology of well-being by investigating the lives of twenty three biblical characters to determine: to what extent they underwent trauma, if they developed PTSD symptomology, and what type of coping skills they utilized that leads to resiliency and well-being. The second chapter of findings will examine the precedent literature concerning trauma, coping, well-being, and the unique stressors concerning missionary life. The third chapter will report the findings from surveys and interviews conducted with AGWM missionaries concerning the trauma, whether they exhibited PTSD symptomology, and what types of coping skills they used to survive.

The combination of biblical exploration, literature review, and original research will produce a theology and theory of missionary well-being that will enable missionaries to survive trauma and grow from their experience. Charts, figures, and tables along with chapter summaries will be used for added clarity.

CHAPTER 5:  
SUMMARY, CONCLUSIONS AND RECOMMENDATIONS

This chapter will summarize with a re-articulation of the purpose, problem statement, research questions, significance, and goals along with methodological methods used in the study. Conclusions will be organized by providing; 1) an overview of the findings articulating a biblical theology of well-being; 2) a synopsis of the research gleaned in the literature concerning trauma, PTSD, coping, and well-being; and 3) a overview of the coping abilities that shape AGWM personnel. These findings will be integrated into a theory of missionary well-being. Recommendations that emerge from the findings will be communicated to the leadership of AGWM and to other missions agencies. Related issues that deserve further research will be identified.

## APPENDIX A: TUTORIALS

Tutorial 1 (MC 907 Dissertation Research)	Instructor/Mentor	Planned Enrolment
A Biblical/Theological Overview of Well-Being Despite Trauma	Dr. Paul Lewis	Fall 2015
<p>In this tutorial I will study the Bible and precedent literature to determine how biblical characters overcame traumatic events. An investigation of the biblical concept of suffering will also be considered to ascertain how current day trauma sufferers can understand the reason for their pain. From this study a theology of well-being will be developed to assist present day missionaries to preserve and remain on field after traumatic incidents.</p>		

Tutorial 2 (MC 908 Dissertation Research)	Instructor/Mentor	Planned Enrolment
Trauma Related Psychological Issues and their Manifestation in the Missionary Population	Dr. Melody Palm	Spring 2016
<p>This tutorial will examine the historical growth of the psychological issues of trauma and coping to develop a clear comprehension of these subjects. From this social science perception, one can start to determine what types of coping skills can lead to missionary well-being.</p>		

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Tutorial 4 (MS 907 Area Studies)	Instructor/Mentor	Planned Enrolment
Contemporary Missionary Well-being Regardless of Trauma	Dr. Brian Kelly	Summer 2016
<p>In this tutorial I will survey AGWM missionaries currently serving on field. This survey will study: the types and frequency of trauma missionaries endure, the possible evidence of PTSD, and the types of coping skills missionaries use in times of crisis. Along with this survey, ten to fifteen semi-formal interviews will be taken from Latin American and Caribbean missionaries who volunteer to tell their stories of trauma.</p> <p>These surveys and interviews along with research of the precedent literature on the causes of missionary resilience will help in determining a theory for missionary well-being.</p>		

Tutorial 3(MC 909 Dissertation Research)	Instructor/Mentor	Planned Enrolment
Contemporary Missionary Well-being Regardless of Trauma	Dr. Johan Mostert	Fall 2016
<p>In this tutorial I will integrate the findings of the original research into a theory of missionary well-being.</p>		

Possible Committee:

Chair: Johan Mostert

Member: Paul Lewis

Member: Melody Palm

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APPENDIX B: DISSERTATION OUTLINE

**TRAUMA AND COPING MECHANISMS AMOUNG  
ASSEMBLIES OF GOD MISSIONARIES**

CHAPTER 1: Introduction .....	15 pages
CHAPTER 2: Biblical Personalities and Trauma: Towards a Theology of Well-being ....	60 pages
CHAPTER 3: Trauma and Coping: Psychological Issues Impacting Missionary Well-being.....	60 pages
CHAPTER 4: Trauma and Missionary Well-being .....	60 pages
CHAPTER 5: A Theory of Missionary Well-Being, Summary, Conclusions and Recommendations.....	60 pages
APPENDICES .....	15 pages
REFERENCES CITED.....	30 pages
Approximate Total Pages.....	260 pages

## APPENDIX C: ETHICAL GUIDELINES

1. Before research that involves human subjects is conducted, **IRB approval** must first be obtained. The researcher will provide accurate information about their research protocol and when it has been approved the researcher ensures that the research is conducted in accordance with the approved protocol.
2. **Plagiarism:** Researchers do not present the work of other authors as their own work.
3. When research **involves other persons** the researcher will ensure that participants are protected from harm, either in the process of conducting the research or in the manner in which the research findings are made known to the public.
4. **Voluntary participation:** all persons who participate in the research must do so voluntarily.
5. **Informed consent:** researchers must be able to produce a signed and dated form that indicates that the participants in their research have been appropriately informed.
  - a. The content of the informed consent document should contain
    - i. The purpose of the research
    - ii. Their right to withdraw from participation, at any time during the research, without any penalty or loss incurred by the individual
    - iii. The estimated time that would be involved in the research
    - iv. Any potential risk or adverse effect that could result in their participation
    - v. A guarantee of anonymity and confidentiality including how the records will be kept confidential and/or disposed of and if there are any limits of confidentiality
    - vi. The prospective research benefits
    - vii. That any questions about the research that they may have will be answered at the conclusion of the process
    - viii. Whom to contact if they have questions about the research or their rights as participants
    - ix. An offer to provide a summary of the findings
  - b. Informed consent for using audio and visual recordings is dealt with in the APA Ethical Principles (Standard 8.03).

- c. Under certain conditions the IRB can dispense with the requirement to obtain informed consent (see APA Standard 8.05; Neuman 2006, 138).
6. **Anonymity** in data collection: it should always remain impossible for someone (including the researcher) to connect specific data to a subject involved in the research.
  7. **Confidentiality**: information obtained from subjects must always be kept secure and unavailable to any person. This includes both person who are involved in the research and those who are not, even when they are the ones who gave permission for the research to be conducted (such as parents or legal guardians).
  8. **Deception in Research**: although it may be necessary to use deceptive techniques in order to obtain some scientific data from participants, it must be acknowledged that deception is unethical. If the value of the potential knowledge outweighs the deception in the research the IRB could consider approval for the research. In any case where deception utilized researchers will debrief their subjects about the nature of the deception at the earliest possible opportunity and provide them with the option to withdraw their data from the study (see Dunn, 2009 pages 53 to 59 for an extended discussion on this subject).
  9. **Honest reporting**: researchers do not fabricate data and will report their findings even when these are negative or do not support their hypothesis. Researchers will avoid false or deceptive statements based on their data. Researchers cannot allow vested interests (their employer, a research funder, or an organization they belong to) to distort, suppress or alter the findings of their research to protect their interests. Researchers will honestly and fairly report any technical limitations, shortcomings or failures encountered in their research.

Ydduh#Jdqfh

April 19,

2013

Valerie Rance

Date

REFERENCES CITED  
(Excluding References in Chapter 2)

- AGWM. n.d. "Assemblies of God World Missions." [www.worldmissions.ag.org](http://www.worldmissions.ag.org) (accessed March 2013).
- Barnett, Keri, Nancy Duval, Keith Edwards, and Elizabeth Lewis. 2005. "Psychological and spiritual predictors of domains of functioning and effectiveness of short-term missionaries." *Journal of Psychology and Theology* 31, no. 1:27-10.
- Encyclopedia. n.d. "Encyclopedia of Mental Disorders." [www.minddisorders.com](http://www.minddisorders.com) (accessed March 2013).
- Global. n.d. "Global Member Care Network." [www.globalmembercare.com](http://www.globalmembercare.com) (accessed March 2013).
- Lindquist, Stanley. 1982. "Prediction of success in overseas adjustment." *Journal of Psychology and Christianity* 1, no. 2: 22-25.
- Maynard, Elizabeth A., Richard L. Gorsuch, and Jeferey P. Bjorck. 2001. "Religious coping style, concept of God, and personal religious variables in threat, loss, and challenge situations." *Journal for the Scientific Study of Religion* 40, no. 1: 65-74.  
doi:10.1111/0021-8294.00038
- Neufeldt, V., and D. Guralnik, eds. 1997. *Webster's New World College Dictionary*. New York: Macmillan.
- Rance, DeLonn. 1999. "The Empowered Call: The Activity of the Holy Spirit in Salvadoran Assemblies of God Missionaries." diss., Fuller Theological Seminary.
- Schwandt, Joanne, Glendon Moriarty. 2008. "What have the past 25 years of member care research taught us? An overview of missionary mental health and member care services." *Missiology: An International Review* 36, no. 3:317-326.
- Tambasco, Anthony, ed. d. *The Bible on Suffering: Social and Political Implications*. New York: Paulist Press.
- . 2002. "Revisiting a provocative theme: The attrition of longer-term missionaries." *Missiology* 30, no. 1: 67-80.

View Coping mechanisms Research Papers on Academia.edu for free. In both men and women, a positive significant relationship exist between positive perceived stress and coping mechanisms; the former predicted the latter. While, the mean scores for avoidant and behavioral coping mechanisms were higher in men, the mean scores for cognitive coping mechanisms were higher in women ( $P < 0.05$ ). Here are coping mechanisms by type: Adaptive Mechanisms: That offer positive help. Attack Mechanisms: That push discomfort onto others. Avoidance Mechanisms: That avoid the issue. Post-Traumatic Growth: Using the energy of trauma for good. Projection: seeing your own unwanted feelings in other people. Provocation: Get others to act so you can retaliate. Remember that coping actions are usually symptoms of deeper problems and addressing them directly can be ineffective or even counter-productive. The best approach is to discover the deeper cause and address this, which will hopefully then result in the coping mechanism disappearing. Be aware of your own coping mechanisms and move to more functional means of managing stress. Many have experienced additional trauma such as evacuation, guerrilla warfare, loss of a child, and sexual abuse. These lists are by no means exhaustive. A second characteristic of a crisis is that a person's normal coping mechanisms are not adequate and the person feels unprepared to handle the event. For a period of time, a person's sense of balance or equilibrium is disrupted and it takes higher levels of energy and effort to restore a sense of balance and/or control. It is very important to address and be sensitive to the ways that a person's view of God may be significantly changed whether positively or negatively. Stress. Stress literally means force or pressure. Clearly, many missionaries on the field have experienced traumatic events.