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**CHALLENGES ON THE MISSION FIELD:
A PHENOMENOLOGICAL EXPLORATION OF THE
EXPERIENCE AND IMPACT OF TRAUMATIC EVENTS ON
CHRISTIAN MISSIONARIES**

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Diploma Teaching (Southern Cross University)

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Submitted in fulfilment of the requirements for the

Doctor of Philosophy



School of Arts and Sciences

Discipline of Counselling

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March 2021

Declaration of authorship

To the best of the candidate's knowledge, this thesis contains no material previously published by another person, except where due acknowledgement has been made. This thesis is the candidate's own work and contains no material which has been accepted for the award of any other degree or diploma in any institution. The research presented and reported in this thesis was conducted in accordance with the National Health and Medical Research Council National Statement on Ethical Conduct in Human Research (2007, updated 2018). The proposed research study received human research ethics approval from the University of Notre Dame Australia Human Research Ethics Committee (EC00418), Approval Number # 016007S

Signature:

Name: Julie Nixon

Date: March 2021

Abstract

There is a long and rich, albeit at times complex, history of Australian Christian mission work abroad. Missionaries have been motivated to enter the field by a desire to support the local church and other indigenous communities to attain a range of social, economic, and socio-developmental improvements for individuals and groups alike. However, this work is not without risk for the missionaries, especially when exposed to traumatic events and experiences that may adversely affect their physical, psychological, and or spiritual health and well-being. Understanding the impact of such experiences from the missionaries' perspective is important, particularly in the context of developing targeted and appropriate pre-placement training, on field support, and post-placement debriefing protocols, as well as addressing placement attrition rates. Employing an Interpretive Phenomenological approach, this qualitative study explores trauma-related experiences of Australian Christian missionaries to understand how those experiences influenced the length of field placement and attrition rates and affected their overall functioning during and post-placement. Seven Australian Christian missionaries ranging in age from 28 to 64, each with more than two years of field experience, participated in a 2-3-hour interview, with transcribed data examined using the Interpretive Phenomenology Analysis (IPA) approach. All participants had returned from the field earlier than anticipated as a result of experiencing a significant traumatic event or having undergone multiple traumatic experiences, which could be assessed as cumulative trauma. Themes emerging from the study included; the effects of both single as well as cumulative traumatic events on general functioning, psychological adjustment, and ultimately the discontinuance of field placements; the impact of pre-existing relational styles viewed through an attachment lens; coping and adjustment strategies and resources employed to ameliorate trauma-related responses or events experienced 'in situ'; and the effectiveness of

existing pre-placement, trauma-focused training with respect to managing unforeseen events during placements.

The study's findings reveal that current missionaries may be exposed to significant numbers and forms of trauma during their placements, potentially impacting their psychological and spiritual well-being. Despite the influence of a specific call from God to the mission field and the utilisation of an array of protective measures, including their connection to God, the experiences of trauma led these participants to return from the mission field earlier than expected. The findings contribute to a broader understanding of the complexities of serving on the mission field. Specifically, this study contributes to understanding the psychological, physical, spiritual, and relational implications for missionaries experiencing traumatic events and how those experiences contribute to attrition. These findings have implications for organisations involved in both training and sending missionaries to the mission field and their ongoing care practices.

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First and foremost, I wish to acknowledge the enduring and unwavering support of my supervisors, Dr Linda MacKay and Dr Maureen Miner-Bridges, whose belief that I could become a researcher far surpassed any such notion of my own. Their encouragement and enthusiasm have significantly sustained me during those times when I was close to giving up and had no belief that I could ever bring this thesis to completion. Maureen's patience in explaining concepts that I clearly did not understand and extraordinary scholarship as a researcher has undergirded the integrity of this research. I am truly indebted to you both and am thankful for your commitment to me as a person and to the research project itself.

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The research topic itself was inspired by missionaries and support workers who have shared their difficult stories with me over the years. The invitation you extended to me into your unique lives and the more painful aspects of missionary life left me with the burden of wanting to make a difference in a broader forum. This thesis is borne out of the pain and hardships of so many who will remain nameless and faceless in this wider context but will forever remain in my heart. Thank you.

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Definition of Terms

Attrition

In the mission context, attrition occurs when a missionary leaves the field for preventable reasons and earlier than the prearranged date for cessation of service. As a result, in some cases, the missionary is not replaced, leading to fewer overall numbers on the field.

Calling

A calling in the context of this thesis is the conviction that one has been asked by God to respond to a specific need, situation, or location (van Vuuren, 2017).

Christian Mission

Christian mission is the practice of Christian churches and organisations sending people into areas of need to support poverty alleviation, community development, church planting, biblical training, bible translation, education, disaster relief, health education and medical intervention. The underlying theological basis of mission are the words of Jesus in Mark 16:15 (NIV, 1988) “Go into all the world and preach the gospel to all creation.”

Interpersonal Neurobiology

Interpersonal Neurobiology explores the way in which the brain is directly impacted by life experiences. Understanding how neural development affects the body, mind, and spirit helps to understand how people relate to each other and what can cause relationship disruption.

Member care

Those working on the mission field are often sent by a specific mission sending organisation or church, thus being known as members of that organisation or church. Those involved in member care seek to care for and support all personnel who have been sent under their banner. This is inclusive of the whole family and for the duration of service from the

time of selection to the time on the field and their return to the home country (O'Donnell, 1997).

Missio Dei

Missio Dei is a Latin phrase that speaks to the “mission of God.” It is God who has a mission to set things right in a broken world, to redeem and restore it to what He has always intended. This is not a program of the church; it is the activity of God in the world, and the church is God’s instrument sent into the world to participate in His redemptive mission.

Missionary

A missionary is one who has a conviction to serve in a missional context and follows through with specific training and a physical move to an area or country where there is a need for their skills and training. A missionary is most often sent to the field by a church or mission organisation.

Missiology

Missiology is the study of Christian missions, their methods, and purposes. According to Bosch (1991, p. 9), missiology “seeks to look at the world from the perspective of commitment to the Christian faith.”

Mission field (‘the field’)

The field is anywhere on earth where Christians are serving as the ‘hands and feet of Jesus’, doing what Jesus did when He walked on earth, caring for the poor, confronting injustice, and delivering a message of hope and acceptance. The field has been commonly misunderstood as people working in an overseas location, with evangelism being the primary concern. The bulk of missionaries are situated in the two-thirds world, but the work has changed significantly to incorporate community development, medical aid, education, and disaster response.

Non-Government Organisation (NGO)

An NGO is a non-profit group that functions independently of any government. They are usually organised on community, national and international levels to serve a social or political goal, such as humanitarian causes or the environment.

PTSD

The Diagnostic and Statistical Manual of Mental Disorders, Fifth Edition (DSM-5) (American Psychiatric Association [APA], 2013) specifies diagnostic criteria for trauma-related conditions such as Post-Traumatic Stress Disorder (PTSD). They include a history of exposure to traumatic events by witnessing or direct exposure to a traumatic event and or repeated exposure to traumatic events as experienced by first responders.

ReMAP 1

The Reducing Missionary Attrition Project (ReMAP 1) was commissioned by the National Missions Congress in 1993 in an attempt to find out how many missionaries return home and why. Using a survey, the process also looked at the difference between Old Sending Organisations from countries such as America, Australia and Europe and New Sending Organisations from countries in South America and Asia (Blocher, 2007).

ReMAP II

ReMAP II was commissioned by the Mission Commission of the World Evangelical Alliance (WEA-MC) in 2002 as a follow-up to the findings of ReMAP I. It was set up to “Identify best agency practice... promote good practice ...and provide a tool to strengthen missionary retention” (Lim, 2007, p. 24). It was a collaboration of researchers from many countries who surveyed sending organisations from 22 countries and six continents.

Sending agency/organisation

Some missionaries go to a place to serve without support from an agency or a church. Most missionaries will be ‘sent’ by an agency that will help them with a placement to fit their

skill base, financial support, cultural orientation, and member care. Agencies will also be involved in pre-service preparation, accountability, provision of a team, and negotiating such necessities as visas, housing, and at times ‘in situ’ networks in times of crisis. A sending agency may be a denominational (e.g., Church Missionary Society) or interdenominational (e.g., Interserve).

Trauma

Trauma is a complex construct able to be defined in different ways. For example, Wainrib (2006) proposed that trauma occurs when (i) “the individual’s ability to integrate his or her emotional experience is overwhelmed”, and (ii) “the individual experiences (subjectively) a threat to life, bodily integrity, or sanity” (p. 11). Trauma is known to cause a “fundamental reorganisation of the way the brain and the mind manage perception” (van der Kolk, 2014, p. 21).

Traumatic Event

A traumatic event overwhelms the person’s ability to integrate the experience, leaving them feeling physically threatened or emotionally distressed, and or frightened.

Traumatic Stress

Traumatic stress can be defined as anything that overwhelms a person’s coping capacity. This may include categories such as death, safety, catastrophe, personal crises, and the failure of support systems.

Chapter 1: Introduction

Preface

This study has been prompted by my involvement in several short-term missional visits to countries in South-East Asia and the Asian Subcontinent. As a counsellor and educator, my experience, skills, and training have been used to the maximum in running training programs, marriage courses, personal counselling, and consultation around areas of specific work common to the Non-Government Organisation's (NGO) field of work and my areas of expertise and practice. Having travelled at the invitation of NGOs working in these countries, I have been sought out as a safe person to whom those on the field could disclose personal difficulties. Ultimately this has led to providing a range of personal counselling and mentoring sessions in amongst training and teaching programs. As a result, over many years, I have continued to offer both personal and organisational support to missionaries via a selection of digital media and face-to-face. Through my work for NGOs, I have developed an awareness of what it is like for many missionaries serving in a long-term capacity. That awareness has increased as a result of personally experiencing critical safety issues in war-torn countries under military regimes, and of scrutiny under such regimes coupled with having been in the midst of immense poverty and dislocation, as well as tsunami and earthquake-ravaged areas. My personal experiences have heightened my awareness of the complex struggles many missionaries endure.

Being an external person in what is often, for safety reasons, a closed community has invited a level of self-disclosure from more permanently placed missionaries. It became apparent that missionaries regularly experience traumatic events, and many live in constant states of hypervigilance. While noting during counselling sessions that people are indeed adaptive and resilient and that God intervenes miraculously in many situations, I observed

and concluded that the cumulative effects of living in such hypervigilant states eventually take a toll on many, if not all, areas of the person's life. This awareness prompted me to wonder whether many highly committed missionaries return to their home countries because the trauma load, with all its complications, has become too much to bear.

The deeply personal and vulnerable space afforded during a counselling session is not dissimilar to an interview process. Counselling skills of listening, asking probing questions, empathy, and curiosity lend themselves to the exploration of a missionary's lived experience using Interpretive Phenomenology (Smith, Flowers & Larkin, 2009) as a methodology and analysis approach. An interview process using a semi-structured protocol, coupled with intuitive, sensitive probes, was a comfortable process because of the common skills used in a counselling session.

Rationale

Caring for the poor and disenfranchised has been a central concern and focus of the Christian church. This work is often undertaken by missionaries, many in a voluntary capacity (Ott et al. 2010). Zurlo et al. (2019) note that the World Christian Database (Johnson & Zurlo, 2018) conservatively estimates that, by mid-2019 internationally, there will be more than 5400 missionary organisations sending approximately 450 000 missionaries to most countries in the world. Following the spirit of Jesus Christ's example, Christians, in general, and missionaries, in particular, are motivated to address the emotional, social, and physical needs of the poor and vulnerable while concurrently holding a compassionate stance concerning any perceived spiritual "lostness" of such people (Ott et al., 2010, p. 177). While evangelism of the other might be at the heart of Christian missionaries' vocational stance, there are other motivating factors that are prompted by God's words to His followers. These include poverty alleviation, addressing homelessness, aid distribution during times of

disaster, provision of medical intervention and training, education, and promotion of micro-enterprising and agricultural development. These activities have become the primary (daily) work and focus of missionaries (Hale, 1995; Ott et al., 2010; Yohannan, 2004). In seeking a mandate for their work, missionaries turn to the words of Jesus, finding in Luke 4:18-19 clear direction:

The Spirit of the Lord is on me,
because he has anointed me
to proclaim good news to the poor.
He has sent me to proclaim freedom for the prisoners
and recovery of sight for the blind,
to set the oppressed free,
to proclaim the year of the Lord's favour. (New International Version,
1988)

In a world where injustice, poverty, and oppression are widespread, Christians are commissioned to combine their faith with response which is an undeniable challenge in today's very complex and troubled world. (Engel and Dyrness, 2000).

This challenge to care for the poor and disenfranchised is a thread through the Old Testament of the Holy Bible. Deuteronomy 15:8 gives instructions to care for poor relatives. "don't be hard-hearted or tight-fisted toward your poor relative. Instead, be sure to open your hand to him and lend him enough to lessen his need." God made provision for those in poverty as He brought His people out of slavery in Egypt "If your brother becomes poor and cannot maintain himself with you, you shall support him as though he were a stranger and a sojourner, and he shall live with you. Take no interest from him or profit" Leviticus: 25: 35-37. This thread continues throughout the Old Testament, where God commanded the

Israelites to take care of the poor by leaving portions of their harvests (Exodus 23:11; Leviticus 19-10; Leviticus 23: 22; Leviticus 25: 25; Leviticus 25: 35; Deuteronomy 15:11).

Proverbs 21:13 and 28:27 set out a further instruction from God, which comes with a condition “those who give to the poor will lack nothing, but those who close their eyes to them will receive many curses,” indicating that those who do not care for others will not have their prayers answered, nor will they flourish. Isaiah takes up the command by linking caring for the poor and looking after the oppressed with wellness. “And if you spend yourselves in behalf of the hungry and satisfy the needs of the oppressed, then your light will rise in the darkness, and your night will become like the noonday.” (58:10). God is also an advocate for the oppressed and calls His followers to be like-minded.

He upholds the cause of the oppressed and gives food to the hungry. The Lord sets prisoners free, the Lord gives sight to the blind, the Lord lifts up those who are bowed down, the Lord loves the righteous. The Lord watches over the foreigner and sustains the fatherless and the widow, but he frustrates the ways of the wicked. (Psalm 146: 5-9)

Notably and increasingly, contemporary missionaries are sent to field placements where there are potential and elevated physical and psychological risks to their well-being. For example, some are placed in war-torn countries, where there is marked political instability and unrest, often profound poverty, rampant persecution of minority groups, and ethnic-based divisions, with obvious and inherent risks associated with being in such locations and working with marginalised communities (Bagley, 2003; Schreiter, 2002). As such, missionaries are potentially confronted with situations and events that expose them to significant trauma which can include unforeseen natural disasters, war, being taken hostage with the threat of loss of one’s life, police and army investigations in countries ruled by military juntas, rape, murder, and other forms of serious physical, and or psychological injury

(Irvine et al., 2006). The decision to undertake a mission placement can expose at least some missionaries to significant risk and potentially long-term mental health and related consequences. The threat of death is imminent in the lives of many missionaries, with Zurlo et al. (2018) estimating that approximately 800 000 Christians were killed for their faith in 2018. Although most of those who were martyred were nationals, Christian missionaries are also included in this number.

The loss of missionaries to the field is an ever-increasing concern to sending organisations. With up to 50% of missionaries leaving the field in their first five years of service, the factors contributing to attrition need examination (Stephens, 2018). While mission service was once seen as a lifetime commitment, more and more mission organisations are asking those who intend to serve to commit to short-term, which is from one month to five years, or longer-term career missionaries, which is now seen to be up to 10 or more years. Many still leave their homeland expecting to stay in their country of service for their lifetime. The Church Missionary Society (CMS, 2021), Serving in Mission (SIM), and Global Interaction are just some of many organisations that claim to train and send missionaries for long-term service. CMS (2021) proposes that a term is three years with a six-month home assignment which can be followed by further terms.

It is noted that attrition can be categorised into preventable reasons as well as natural attrition, which would include the completion of a project or a nominated term of service, the health of family both on the field and at home, children's schooling, or needing to leave the country of service for visa reasons or safety because of political volatility. The preventable attrition of those on the field has been the concern of many researchers; however, there is, to date, no notable research where missionaries have been asked to describe the reasons why they left the field of service.

In the face of evident and increased risks associated with some missionary field placements, pre-placement preparation, training for member care personnel, and post-placement debriefing, especially in relation to risk management and minimisation becomes increasingly crucial. However, at present, it is unclear how well-prepared missionaries placed in risky locations are, with respect to dealing with and adjusting to, complex events and experiences they may encounter during field placements. O'Donnell and O'Donnell (2013, p. 339) report, "volunteers are often poorly prepared for their own emotional reactions to the impact of their experiences when providing care and relief to others," suggesting that some are likely to struggle when faced with such challenging circumstances and confronting emotional responses. While often receiving extensive training in theology, language, and cultural immersion, historically, missionaries have received little to no training to equip them to cope effectively with the psychological implications of missionary work or training related to managing well-being during and immediately after a traumatic event or an ongoing traumatic situation. Left unaddressed, the continuance of this practice has possible organisational implications regarding placement attrition rates and the duty of care of missionaries sent by the organisation. This includes implications for the individual regarding physical well-being, psychological adjustment and or spiritual well-being, as well as implications for communities in developing countries who are likely to be less well served and supported by missionaries leaving placements early or who are traumatised and incapacitated while still serving in the field.

To date, little research has been conducted into the effects of traumatic events on missionary populations (Bendiksen, 2015), and there appears to be no qualitative research into the effects of traumatic experiences on missionaries who have returned from the field or if, in fact, those who have returned would cite traumatic experiences as the reason for leaving the field. However, several quantitative Likert-style studies indicate that exposure to

traumatic events contributes to attrition. Given that these are often online surveys, the quantitative research is limited by pre-determined categories, which do not give a more accurate representation of the experiences of the respondents. Several researchers into missionary attrition suggest that the impact of trauma on serving missionaries needs to be examined to explore whether experiencing traumatic events can be linked to missionary attrition (Brierley, 1997; Carter, 1999; Erikson et al., 2009; O'Donnell & O'Donnell, 2013; Rosik & Borisov, 2010; Taylor, 1979; Vanhuis, 2019). More specifically, there is no research available that examines the Australian context with respect to not only attrition as a result of traumatic experiences but also missionaries' experience of specific training regarding trauma and member support during and after a traumatic event.

Aims and Objectives

The aim of the study is to explore trauma-related experiences of Australian Christian missionaries to understand the kinds of events that contribute to leaving field placements earlier than expected and how adverse 'in situ' events and experiences influence the length of field placement and affect overall functioning during and post-placement. Sending organisation and on-field member support will be explored to clarify what was helpful, as well as what was needed, in order for the participants to continue to serve in their posting. The objective of the study is to inform and ideally help improve current pre-placement and post-placement protocols; to inform on the field member support protocols, and to aid in the development of trauma-related education materials that directly address contemporary missionary placement experiences, with the broader objective of decreasing current placement attrition rates.

Research Questions

The research focus of this study is the exploration of the experience and impact of overwhelming events on Australian Christian missionaries.

Specifically, the study seeks to extend present understanding in relation to:

- (i) the type of traumatic events experienced in field placements;
- (ii) the effects of traumatic events on general functioning, psychological adjustment, and the discontinuance of field placements;
- (iii) coping and adjustment strategies and resource utilisation employed to ameliorate any reported trauma-related responses or experiences experienced 'in situ', and
- (iv) the provision and effectiveness of existing pre-placement trauma-focused training.

Summary

This chapter has provided a brief justification for the need to examine missionary attrition in traumatic experiences. An outline of the phenomena has been provided; that is, the lived experience of missionaries who have returned from the field earlier than expected. The rationale for the study was to provide contemporary qualitative research into the attrition of Australian missionaries in recognition of the enormous cost emotionally, relationally, and financially when a missionary does not complete their intended term of service. The aims and objectives of the study are to address training practices for missionaries pre-service and provide evidence for the validity of sound member care support while on the field. Finally, the research questions are provided.

Organisation of the thesis

This thesis is organised into six chapters; the current chapter presents an introduction to the study with a brief outline of the aims and objectives and purpose of the research.

Chapter two examines the known literature pertaining to the topic, which places the study into the context of mission, the various forms of trauma, humanitarian aid workers, and grief and loss. The impact of continuing stress and traumatic experiences on well-being is also situated within the protective factors of a relationship with God, resilience, and spiritual coping. This chapter also includes a review of the literature on the effects of being on the mission field on the children of serving missionaries.

In chapter three, the design of the research study is presented, which describes the phenomenological methodology and the research method for the qualitative study. It begins with an orientation to the ontological and epistemological perspectives informing the study, followed by an outline of the history of qualitative research, phenomenology, and IPA. The specific components of IPA are discussed, which leads to the specifics of the study, including the use of IPA as both a methodology as well as an analysis tool. The methods for participant recruitment, data collection using semi-structured interviews, and transcript analysis using IPA are presented. In the following findings chapter, the participants' lived experience is paraphrased, with supportive evidence from direct quotes from the interview transcripts. Chapter five presents a discussion of the researcher's analysis of the data, which incorporates the analysis part of IPA. This involves engagement with the literature to form a reflexive, interpretive exploration of the lived experience of the participants. In this chapter, the importance of the call of God to mission is examined, which gives an understanding as to why missionaries endure overwhelming hardships. Those encounters reported by the

participants in this study are investigated along with the measures taken that promoted well-being and resilience.

Finally, chapter six suggests implications for further research and practice as well as the selection and support of missionaries. The importance of pre-service training in trauma for missionaries, as well as ongoing training for field support personnel and home office personnel, is highlighted. Suggestions are made around training in conflict resolution and the use of external mediators where team difficulties arise. The need for a well-informed and personally processed theology of suffering was evident. In addition, the limitations of the study are presented, along with a conclusion to the entire thesis.

Chapter 2: Literature Review

This research project was established to explore the experiences of Christian missionaries who have returned from the mission field earlier than expected. Although there is a body of work examining missionary attrition, little has been done to investigate the results of traumatic experiences on this population and whether they could contribute to missionaries' early return from the field. However, the effects of trauma on first responders and aid workers in foreign countries have been well investigated and may be applied to the missionary population as the work is often similar, particularly during crisis periods. In particular, many aid workers profess a Christian faith, so their experiences may also be generalised to missionaries. This chapter identifies the theoretical framework from which the investigation took place, including reviewing the research around the trauma experienced by aid workers and what has been learnt from research around member care.

2.1 The call to mission

The call of God through mission is the way in which the church demonstrates faith in God to the world (Knoetze, 2017). He suggests that to be part of God's call to be healers in a broken world, obedience is required, where "listening, hearing and discernment" are necessary (p. 1). "Sacrifice and a sense of calling have a long history in the discourse and theology of missions," writes Howell (2009, p. 206), with Rance (2012) asserting that a call to missionary service is a prerequisite and divinely given by the Holy Spirit. It could be argued that mission is not an add-on program of the church, but it is the church; that is God's directive that the church is missional in character (Brisco, 2018; Glanville & Glanville, 2021). Kreminski (2015, p. 14) writes that the church is a "called out group of people who are sent into the world". The concept of "sent-ness" is explored by Carden (2017, p. 8), who

notes that the New Testament draws attention to ‘being sent’ more than 40 times, with Jesus ‘sending’ his disciples out on mission on many occasions. The apostle Paul in his writings to the early church, repeatedly admonished people to go and share the news of Jesus Christ “As the Father has sent me, I am sending you” (John 20:21). Being sent is a sign to the world that God is restoring creation (Glanville & Glanville, 2021).

Steger et al. (2010) report that having a sense of call is a spiritual (Christian) phenomenon that directly links one’s purpose in life to one’s work. However, Duffy et al. (2018, p. 426) define calling more broadly “as an approach to work that reflects seeking a sense of overall purpose and meaning and is used to help others or contribute to the common good, motivated by an external or internal summons.” In the context of this research, a call is motivated by an ‘external summons,’ that of God.

Sibanda (2016, p.10) proposed that “Missionaries are not born. They are raised by God and formed in their local Christian community”, and Stamoolis (2002) suggests that the sense of being called by God is primarily the motivation for missionary service. Christianity had its humble beginnings in a stable in Bethlehem with the birth of Jesus Christ. According to the Holy Bible, Jesus was born to be the saviour of the peoples of the world, “I bring you good news that will cause great joy for all the people. Today in the town of David a Savior has been born to you; he is the Messiah, the Lord” (Luke 1:10-11). According to Johnson and Zurlo (2018), over one third of all the people of the world would affiliate themselves with the Christian religion. How did the birth of a child in the First Century AD evolve into the world’s largest religion? Robert (2009) answers this question by claiming that Christianity is a missional religion, the word ‘mission’ is derived from the Greek meaning ‘sending.’ The basis of this phenomenon comes from Jesus’ command to his disciples to “Therefore go and make disciples of all nations, baptizing them in the name of the Father and of the Son and of the Holy Spirit” (Matthew 28:19). The universality of Christianity means that its adherents

move to new locations, including new countries, in order to share the same message that Jesus Christ did while He was on earth. The incarnate nature of Jesus meant that He lived amongst people bringing healing and release to a broken world (Kreminski, 2015).

The early stereotyped concept of a missionary wearing a pith hat venturing into the jungles of Africa with conversion at their heart has been replaced more recently by the concept of mission as giving aid to those in need. Present-day missionaries are involved in disaster response, the alleviation of human trafficking and poverty, human rights advocacy, health training and delivery, education, micro enterprising and community development, to name just a few of the projects Christians may be involved in (O'Donnell & O'Donnell, 2013; Robert, 2009).

Mission work has evolved into more than sharing the message of Jesus Christ (evangelism) to taking up Isaiah's words in chapter 58: 6-8:

This is the kind of fast day I'm after:

to break the chains of injustice,
get rid of exploitation in the workplace,
free the oppressed,
cancel debts.

What I'm interested in seeing you do is:

sharing your food with the hungry,
inviting the homeless poor into your homes,
putting clothes on the shivering ill-clad,
being available to your own families. (The Message Bible).

A post-modern perspective of mission is emerging in young people in the United States, writes Richardson (2013), with a move from evangelism to mission

when it genuinely and authentically accepts people where they are, has no strings attached, cares for felt needs of the people themselves, honours the people's perspectives on what actually helps them without being humiliating or creating dependency, and guards the dignity and worth of people at the same time as it challenges them toward conversion to Christian faith. (pp. 80-81)

In the second purposeful study into missionary attrition, ReMap II (Hay et al., 2007, p. 14) notes that “a clear sense of God’s calling into mission service” is the single most significant factor in why people commit to missionary service. This survey attempts to define what constitutes a call, with some naming a direct communication from God through Bible readings and the affirmation of respected Christians. Others, more specifically, are drawn to people groups rather than regions or countries; this is further undergirded using skills and training such as teaching or medical training. Stamoolis (2002) insists that a call must be confirmed by other people and contends that just because a person may be sent by an agency, a specific call by God may not have been confirmed. He goes on to assert that those who have a determination that they have been called by God to mission have resilience during difficult circumstances, which enables them to stay. Stamoolis lists the way in which people hear the call to mission as through dreams and visions, direct communication as in the audible voice of God, through the Bible, the preaching and guidance of others, and a sense of the diverse needs of the world. Hibbert et al.’s (2015) study of Australian missionaries affirmed that the call to mission was introduced and confirmed in the context of relationships, that of serving missionaries, pastors, visiting speakers, family, and friends. Hearing missionaries share stories of their work on the field was named a significant influence in introducing serving on the mission field as a possibility.

In his dissertation, where he researched missionary longevity, Stephens (2018, p. 36) claimed that a “deep sense of calling and hope in God” was a prerequisite for thriving and remaining on the mission field. Dik et al. (2014) suggest that having a calling is integral to job satisfaction and thriving in the workplace. They go on to say that a calling maximises a sense of purpose and meaning through tasks that fit with a person’s values and strengths. Scheitle and Adamczyk (2016) found in their study of religious not-for-profit organisations that having a calling by God was a common thread throughout the founders of these organisations. They note that having a calling provided a profound sense of confidence in the success of the organisation because God had ordained it.

However, van Vuuren (2017) contends that having a calling can be stressful as goals may be unrealistic and difficult to attain, thus causing despondency and suffering. He also notes that it is difficult to redirect or challenge someone who operates under a sense of being called by God because He is the final authority. As the means by which a calling is accessed is undetermined, it is fraught with issues around interpretation and the human need for affirmation and significance. Indeed, Hahnenberg (2010) warns against individualism which is unrestrained, especially where the individual does not have any influence from others and constructs their own meanings. In their 2019 research, Duffy et al. propose a theory of calling which draws together the considerable body of research in this area. They suggest when a calling is being lived out, job satisfaction and performance will increase; however, they also contend that a calling may have a dark side where the calling is compromised by personality traits (e.g., workaholism, perfectionism), as well as difficult work environments.

Furthermore, Howell (2009) challenges the rhetoric around the call to mission, contending that some are drawn to mission work because of a desire to travel. It would seem that a calling in its purest form is difficult to qualify as it is fraught with many contributing and often conflicting factors. It is clear, therefore, that not all who are on the mission field

have a sustainable calling from God, which makes living out the perceived calling challenging.

There is a conflict between notions of altruism and reciprocity in the call of Christian mission that can make balancing the aims and needs of the missionary with those of the sending mission organisation very difficult. Altruism, or the concern for the well-being of others, is a concept rooted in Christianity and one central to Christian mission (Grant, 2000). Altruism is born out of empathy, which is the capacity of an individual to understand and share the feelings, thoughts, and experiences of another (Rothschild, 2006). Batson's theory of altruism (Batson, 1991) proposes that an individual's recognition of the plight of another is motivated by empathic emotional arousal to increase the well-being of the other. Significantly, the focus on the well-being of the other excludes any egoistic benefit to the giver.

The Christian tradition of promoting the interests of others without the egoistic expectation of reward and in the face of possible personal cost is rooted in the 10 Commandments in the Old Testament, namely, "love your neighbour as yourself" (Leviticus 19:18). The concept of reciprocity is introduced in this text with the command to treat the other at least as well as one would want to be treated. This is further reinforced in the New Testament, where Matthew 7:7 exhorts the followers of Jesus "in everything, do to others what you would have them do to you, for this sums up the Law and the Prophets." Similarly, Luke 6:31 writes, "Do to others as you would have them do to you." Further, the Bible implies that caring for the other can involve personal sacrifice. In John: 15:12 and John 3:16, Jesus tells His disciples that the ultimate sacrifice may include death, as it did for Him. Jesus said, "A new command I give you: Love one another. As I have loved you, so you must love one another" (John 13:34). The biblical implication is that loving the other may involve sacrifice, including one's own life. From a utilitarian perspective, that is, following an

approach that secures the greatest happiness for all, in loving one's neighbour as oneself, egoism and altruism are mutually exclusive (Collins, 1985). Whereas sacrificial altruism may be somewhat achievable on the mission field, the subtlety of reciprocity is more akin to the relationship between the missionary and the sending organisation. In this relationship, each needs the other for the mission work to be carried out effectively. If the needs of each are not met by the other, discouragement and disillusionment may result. Furthermore, it would seem that Christians often get caught up in a form of reciprocal relationship with God, which Paul addresses in Ephesians 2:8-9 "For it is by grace you have been saved, through faith—and this is not from yourselves, it is the gift of God—⁹ not by works, so that no one can boast." Paul was addressing the tendency for Christians to do 'good works' in order to earn God's favour which implies reciprocity.

However, a call to the mission field may involve conflicting motivations for many. The goal may be to alleviate the suffering of others, but for a missionary, this is most often alongside a passion for evangelism, where the immediate needs of a person may get lost in the focus on caring for their soul. Mission organisations also put evangelism at the forefront of their goal, which from an organisational perspective may cause conflict with the missionary on the field who, as a result of their compassion, responds to the more immediate needs of the people around them, such as medical care and poverty alleviation. Calder et al. (2021) see this as a conflict as those with an altruistic motivation grapple with meeting the needs of the other, but the needs of the self and of the sending agency are also evident. This dichotomy is based on a false notion that one's motivation may be purely altruistic or motivated by God in His perceived call to sacrifice all, in order to serve Him. Furthermore, it is possible the goals of the missionary, which are prompted by the urgency for salvation and a perceived call from God may become a moral question around what is right and wrong. Scott and Seglow, (2007, p. 2) propose that "religious zealots" get entangled with this confusion.

Indeed, Aristotle raised the question of whether it is possible to be motivated by a concern for the well-being of the other without eliciting benefit for oneself (Aristotle, 1976).

So, it seems that missionaries are often motivated by an empathetic response to the suffering of others which enhances their sense of call. While the biblical concept of 'agape' love is central to mission work, Grant (2000) claims that the extreme altruism of putting the other first is fraught with unrealistic expectations and may, in fact, be counterproductive to one's well-being and alien to the natural instincts of humans. Hibbert et al. (2015) maintain that the most recent generations of missionaries do not speak in definitive terms of a certain call of God to go to a particular country with a specific sending organisation, but are more likely to talk in more general terms around 'it seems right to go'. This generation asks questions and finds the best fit between their training and abilities and a task. Perhaps the new generation of missionaries is led more by altruism than by a specific call from God, or possibly both. There is much evidence that the experience of short-term mission trips can often lead to a commitment to long-term service. Short mission trips can open the traveller's eyes to the disparate needs of people in other lands, where they are confronted with abject poverty and injustice (Hibbert et al., 2015).

de Waal (2008) proposes a theory of altruistic behaviour which is minimising one's discomfort by serving others who are in pain, which ultimately comes at a great cost to oneself. Altruism may also be the underlying cause of tension between the sending organisation, claim Jelovac and Kembou Nzale (2017). The sending organisation is concerned about overall outcomes and providing the resources needed for the work. The missionary is connected to people and has firsthand experience of hardship which evokes an emotional response. Their empathic concern for others is frustrated when decisions made by the sending organisation impede and compromise the care of those with whom they are working. It would seem then that promoting the welfare of the group, which would include

those who serve, those who send, and those who are being served, is an approach that has maximum benefit for all, where the theory of collective identity more accurately addresses the dilemma. Collective identity is based on the shared stories of the individuals, which introduce a new relationship between the people involved, which would be a reciprocal relationship (Eder, 2009).

2.2 The selection of missionaries

Barnett et al. (2005); Hay et al. (2007), and Stephens (2018) note the vital importance of the selection process of potential missionaries in making sure they remain on the field. They make reference to ReMAP I, drawing attention to this inadequacy in previous years which changed the selection screening process of many mission organisations. It was seen that the more screening undertaken contributed to less attrition. Matters such as children's schooling, the support of extended family on the missionary service, marital harmony, previous cross-cultural experience, participating in ministry at the local church level, ability to manage stress and difficult circumstances, contentment with marital status, financial support, and prayer support were noted in ReMAP II as having a significant contribution to missionaries staying on the field. It was suggested that these items need exploration prior to service. Psychological assessment is a relatively new addition to the selection process, with many organisations not taking advantage of the information about the suitability of a candidate available through such an assessment (Hay et al., 2007). They comment on the suspicion around the use of psychological tools, which is noteworthy and will be addressed later in this review. Psychological assessments can not only isolate personality disorders, which make working in a team or in a cross-cultural situation difficult, but can also draw attention to issues around identity, racism, cultural superiority, and attitudes towards women. Psychological assessment can also uncover previous trauma history, which may be a

mitigating factor in the early return of a missionary after experiencing traumatic events on the field. This is supported by Lopez Cardozo et al.'s (2012) study of humanitarian aid workers. However, Cousineau et al. (2010) contend that psychological testing is not always administered in accordance with prescribed testing manuals and it is common for psychological screening to be misappropriated. They concluded that there is a dearth of appropriate testing tools which can be used in a regulated and targeted manner for those intending to serve overseas. Hall and Sweatman (2002) are critical of the use of psychological screening as a means of assessing suitability for the field, as the ability to be able to adjust to the pressures of working cross-culturally is not assessed. They contend that assessing psychopathology only gives a glimpse of what weaknesses and strengths may be present, thus giving a false sense of fitness to serve on the field.

With this in mind, Barnett et al. (2005) not only recommend psychological screening as a way of reducing missionary attrition but point out that sending organisations must follow through with recommendations. They highlight that missionaries must possess the needed internal resources in order to cope with the high demands of being deployed on the field, again recommending the Minnesota Multiphasic Personality Inventory (MMPI) as a screening tool. This study suggests that those with pre-existing mood disorders and family dysfunction are less able to maintain the demands of mission service. Despite making this recommendation, they also note that some missionaries exhibit no pre-existing psychopathology, but significant functioning problems can result from the stressors of living on the mission field. Further examination of what these stressors may be is not offered. Schubert (1991) also believes that the onus is on mission sending organisations to use sophisticated assessment tools to indicate prospective candidates with maladaptive coping skills and destructive personality disorders. Those with inflexible traits are capable of causing dissension, disagreements, and exhaustion on the field as leaders and co-workers try to

negotiate extreme behaviours. In a more recent study, Gregory (2016) recommends the newer MMPI-2-RF as a more efficient and helpful tool for pre-screening of missionaries for possible risk of burnout and attrition. However, he notes that further study must be carried out to validate its usefulness. Gregory (2016) also proposes that the MMPI-2-RF may help identify those who are at risk of conflict with peers and leaders. Hall and Sweatman (2002) also contend that some assessment tools have been validated on a clinical sample and therefore are not suitable for testing a missionary sample which would be, in all probability, non-clinical.

Gingrich (2016) also recommends that if a family is applying for placement on the field, the entire family, including children, needs to be assessed. This includes a couple assessment, a Family of Origin (FoO) review, as well as examining parenting and child and family dynamics and cross-cultural adaptability. Anecdotally the researcher has worked with two mission families who have needed to return home as the eldest child in both families was on the Autism Spectrum. The families believed that the child's overt behaviour was counterproductive to developing their relationships with the national populations with which they were working, as well as taking an inordinate amount of their time and energy in behaviour management.

Furthermore, Lewis Hall et al. (2006) suggest both psychological and spiritual screening processes should take into consideration the findings that those with lower psychological adjustments lack the psychological and spiritual resources to withstand difficulties. In their study, they found that people with an ambivalent relationship with God had fewer psychological resources to utilise during difficult times, which increased the risk of attrition. They cite an example of a missionary with a history of depression who felt alienated from God, and as a result, questioned His existence. Subsequently, this led to questioning the validity of the call to mission work. Conversely, they discuss another missionary who

presented with a histrionic disorder which meant that she over spiritualised her perceived call to the field and defensively deflected any responsibility for the problematic relationships in her team. Consequently, there is much to be considered when assessing suitability for the highly stressful, often physically dangerous, and relationally complex mission field. As data is mostly dated and the nature of mission work is evolving, it is imperative that a comprehensive procedure for screening the suitability of prospective candidates be investigated.

2.3 Missionary Attrition

In exploring whether missionaries return from their field posting because of traumatic experiences, it is important to define attrition as both painful and premature (Taylor, 2002). “Attrition refers to missionaries who are unable to complete their contracted term for preventable reasons, such as lack of home support, poor pre-field training, poor cultural adjustment, or financial concerns” (Dimos & Hasz, 2017, p. 63). They go on to suggest that attrition has both a human and financial cost but also note that attrition damages the goals and reputation of the sending organisation as well as impacts those they work with in the host nation. Cousineau et al. (2010) also note strained relationships with the service country and the emotional costs to the missionary as part of the toll when a missionary returns home unexpectedly. They also indicate that the cost of ‘unsuccessful’ missionaries extends far beyond the emotional and financial toll, suggesting that the cost extends to marriage strain, disappointment, and compromised career options. The cost is summed up by Taylor (1997) “Just the financial implications are dramatic and rather calculable. But the human implications are staggering and incalculable. Can we simply continue to do business as always? Absolutely not!” (p. 14). There are an estimated 450 000 missionaries currently on the field (Johnson & Zurlo, 2018; Zurlo, Johnson, & Crossing (2019), with a conservative

financial estimate for placing a missionary on the field at USD\$40 000. This is a significant impost to the placement organisation and financial supporters, highlighting the need to understand attrition (Centre for the Study of Global Christianity, 2019; Glenny & Smallman, 2000). The financial and personal impact on sending organisations, churches, and, none the least, the missionaries themselves and their families warrants an investigation into why missionaries return from the field earlier than expected.

The ReMAP II (2007) study, which claims to be the largest research study ever completed in missionary attrition, found that, in general, a mission organisation retains 54% of its missionaries on the field over a 10-year period but significantly loses 46% (Hay et al., 2007). This study also revealed that in any one year, small mission organisations (under 50 people) have an attrition rate of 33% a year, whereas large organisations lose only 6%. In Vanhuis' (2019) survey, the 11 sending organisations who responded indicated 348 people returned from the field in 2018, and 295 new missionaries were sent. For these organisations, the attrition rate resulted in a loss of 53 missionaries to the field in that one year.

Interestingly ReMAP II (2007), the most comprehensive study into missionary attrition to date, only surveyed mission sending organisations and leaders rather than the missionaries themselves (Hay et al., 2007; O'Donnell, 2007). In their study on member care practices Camp et al. (2014), made recommendations that missionaries themselves must be included in research projects investigating missionary attrition. A survey of 348 missionaries who returned home in 2018 collected data from the missionary, their sending agency, as well as the field leaders they worked with (Vanhuis, 2019). Interestingly this study showed significant discrepancies in feedback between the three different contributors, with 64% of single missionaries sharing the same perspectives as the field leaders and sending agency and only 54% of married missionaries sharing the same perspectives. Overall, 41% of the total data collected differed between the three respondents. The need for consistent data from

missionaries themselves seems to be of importance here. This study did not delve into deeper reasons for return as it was an online quantitative survey study generating responses from a Likert scale (Vanhuis, 2019).

In ReMAP I, Brierley (as cited in Taylor, 1997) noted that qualitative research was needed to address the high levels of missionary attrition. He writes, “changing the thrust of the research [away from quantitative research] would enable us to explore some categories of ‘qualitative research,’ which could focus less on broader numbers and statistics and more on personal case studies” (p. 98). Given the extensive research conducted amongst missionary organisations in both ReMAP I and ReMAP II it is also surprising that the data collection did not cover exposure to traumatic events as a contributing factor in missionary attrition, as well as including the missionaries themselves in the data collection. Stephen’s (2018) more recent research was a qualitative study that examined why missionaries were able to remain on the field long-term, but it only looked at the factors which enabled longevity with interviews with long-term missionaries. While this study drew attention to the characteristics of a long-term missionary and what supports needed to be in place to enable longevity, it did not encompass those who had returned early from their posting.

To date, most valid studies into the reasons why missionaries return home early have been quantitative in design, which by the nature of such studies, disallow more in-depth investigation into causality. Koteskey (2007) is highly critical of the way data has been gathered about missionaries across the board, contending that questionnaire type research, which has self-rating scales, is fraught with inaccuracies as there is often a difference between what people report and what they actually do. Taylor (1979, p. xvii) indicated that 71% of the premature terminations of field placements were due to what he described as “preventable reasons.” In the review of many studies about missionary attrition, it has been found that some return as a result of “natural causes”, including retirement, death, and the

completion of a project. Potentially preventable return includes reasons such as children’s education, health, marriage issues, team conflict, changing financial support, and unsuccessful cultural adjustment (Hay et al., 2007). Vanhuis (2019) adds that mental health and physical health concerns have been raised as one of the reasons for returning but to date, there appears to be no further research that supports this assertion. Furthermore, Carter, in her 1999 study, names a broad category of stress as a reason for return. Stressors include climate, frequent moving, travel difficulties, work priorities, conflict, too many needs, work overload, values conflicts, time for self, and family responsibilities. Interestingly she asks if the stressors named by missionaries would be any different from those encountered by the general North American population. Overall, it is concluded that larger organisations are able to invest more time and resources into pre-service training and provide more extensive on-field support, thus minimising attrition rates.

The most recent study in missionary attrition surveyed 348 American missionaries who had returned from the field during 2018 (Vanhuis, 2019). To date, there appears to be no similar study of Australian missionary attrition. The American study listed nine groups of reasons for attrition which were reported by the missionaries, their sending organisations, and their field leaders.

Table 1: Reasons for leaving the field

Reason for leaving	Number left
Natural Causes- completed assignment, retirement	65
Health- emotional, physical, children’s health	22
Family- children’s education, marriage, family coping	20
Interpersonal- problems with field, local leadership	9
Career- education, agency transfer, job satisfaction	48

Organizational- disagreement, support issues	13
Field- visa issues, political crisis, closed field	11
Dismissal- termination, job performance	4
Other – personal concerns, unknown, inactive	29

(Vanhuis, 2019)

When looking at these statistics, it is unclear if such an analysis can give a clear picture of precisely why some missionaries returned, as the categories in some instances are broad. Is it possible that emotional health, physical health, political crisis, closed field, and other reasons, including personal concerns, could include those who have experienced traumatic events and are suffering the consequences of such events? Although this quantitative survey is useful, it does not give the deeper information gained by a qualitative investigation. Given that this study demonstrates the attrition rate is greater than the placement rate, it is imperative that a deeper investigation is carried out in order for preventative measures to be put in place. Despite an intensive search, at the time of writing, there appear to be no qualitative investigations into why Christian missionaries return from the field earlier than their proposed leaving date.

2.4 Trauma

In the search for understanding why a missionary may return from the field at a time earlier than expected, it is evident that many missionaries experience overwhelming events as a part of their service experience. An overwhelming event has many interpretations, but for the purposes of this thesis, it will be defined as a traumatic event. The word ‘trauma’ has two meanings, referring to both an event or a reaction to that event (Panchuk, 2018). It is generally understood that not all persons exposed to overwhelming circumstances develop a

trauma response such as PTSD and can negotiate such experiences with minimal personal impact (Bryant et al., 2010). In fact, most people negotiate traumatic events without experiencing a mental disorder or a significant impact on their well-being (Connorton et al., 2012). For others, exposure to overwhelming events can have long-lasting and life-altering effects (Levine, 2010; Ogden et al., 2006; Rothschild, 2003).

What is currently understood is that experiencing trauma is a complex construct that can be defined in different ways. For example, Wainrib (2006) proposed that trauma (as a reaction) is experienced when a person is so overwhelmed that their ability to integrate what has happened is compromised so that they feel like their life and sanity are under threat. Briere and Scott (2015) concluded that “an event is traumatic if it is extremely upsetting, at least temporarily overwhelms the individual’s internal resources, and produces lasting psychological symptoms” (p. 10). Schmelzer (2018) also claims that a traumatic event leaves a person feeling as though they are unable to defend themselves. Trauma is known to cause a “fundamental reorganisation of the way the brain and the mind manage perception” (van der Kolk, 2014, p. 21) and can lead to a debilitating and repetitive cycle of action where the body attempts to keep the traumatic memory alive (Levine, 2010; Ogden et al., 2006; Rothschild, 2003). Earlier in her seminal work, Judith Herman (1997) wrote that the “common denominator (*in trauma*) is a feeling of intense fear, helplessness, loss of control and threat annihilation” (p. 33). More recently, Rothschild (2011) expanded this point, stating, “psychological trauma is a response of the mind and nervous system to an experience that is so overwhelmingly frightening and life threatening that it cannot come to terms with it” (p. 18). The combination of the severity of such events, coupled with the cumulative effect of multiple challenging experiences, may result in both physical and emotional reactions, which would be classified as a trauma presentation. Not only would these events be named as traumatic, but the aftermath could be in keeping with a clinical diagnosis of Post-Traumatic

Stress Disorder (PTSD) or Acute Stress Disorder (ASD) as defined by the Diagnostic and Statistical Manual of Mental Disorders, 5th Edition (DSM-5) (APA, 2013).

A traumatic event may be a single event, such as a car accident or far more complex experiences with enduring consequences, including mental health disorders (Schiraldi, 2000). Babette Rothschild (2011), in her seminal work *'Trauma Essentials'* categorises traumatic events into three groups: natural events including earthquakes, floods, hurricanes, and tidal waves; accidents that cause injury, which may, for example, be a vehicle, boat or household accident; or interpersonal where there is both unintentional or intentional harm from one person to another. This would include such events as rape, assault, torture and war. Briere and Scott's (2015) comprehensive text for treating trauma names major events such as child abuse, mass interpersonal violence, natural disasters, large-scale transport accidents, fire and burns, motor vehicle accidents, rape and sexual assault, physical assault, domestic and family violence, sex trafficking, torture and war as being the most prevalent traumatic events experienced across the world. While in many developed countries it is known that, in general, people will have experienced at least one of these events in a lifetime, those who live in developing nations may be experiencing several of these events concurrently and, at times, in rapid succession (Schaefer et al., 2007). Missionaries will be exposed to similar experiences as their counterparts while working alongside national populations in these countries.

It would seem that experiencing a traumatic event is a natural occurrence from which most people can recover. Peter Levine (2010) has suggested that trauma is a "fact of life" (p. 37), with Briere and Scott (2015) noting that more than half of the general population in the United States of America experience at least one traumatic event in their lifetime. However, in contrast to these assertions that traumatic experiences are a normal part of life, there has also been much examination of the deleterious effects of experiencing traumatic events, with

a growing understanding emerging throughout recent history (Levine & Kline, 2006; Yau, 2019).

2.4.1 The effect of experiencing traumatic events

The earliest recognition of the impact of traumatic events came in the late 1800s when German psychiatrists noted what happened to those involved in significant railroad accidents. It was resolved that what was observed as a “nervous breakdown” was caused by the shock of the accidents, which caused a “recasting of the old somatic model of sick nerves into a new psychological idiom” which was called “traumatic neurosis” which was understood to be outside of conscious understanding (Killen, 2006, p. 81). Furthermore, psychologists in the nineteenth century began to explore how traumatic experiences affected the body, with some proposing that the symptoms arose from the heart with names such as Soldier’s Heart, DaCosta Syndrome, and Neurocirculatory Asthenia emerging (Killen, 2006). The focus for scientists in this field moved toward understanding the impact of traumatic experiences as wounding to the nervous system with labels such as Shell Shock and Railway Spine emerging (van der Kolk et al., 1996; van der Kolk et al., 1997). During World War I, such labels enabled doctors to give a more honourable diagnosis which “preserved self-respect” and allowed the doctor to avoid discriminatory labels such as desertion, personal failure, or cowardice (van der Kolk et al., 1996, p. 48). Much later in the twentieth century, a more psychological basis for such disorders emerged because of the anecdotal evidence of thousands of returned soldiers from World War II, the Vietnam war, the survivors of developmental trauma, and rape victims. The acceptance of PTSD as a category in the DSM-III was a landmark decision towards “an integrated understanding of the effects of trauma on social, psychological and biological functions,” write van der Kolk et al. (1996, p. 60).

van der Kolk (1997) was part of the first team of researchers who conducted the initial neuroimaging trials, which demonstrated that trauma alters brain processes. More specifically, these images demonstrated the brains of those suffering from PTSD had a reduced hippocampal volume, the hippocampus being the region of the brain which regulates emotional arousal. Current research into trauma focuses on the effects of traumatic experiences through the lens of both attachment theory (Bowlby, 1997) and neurobiology (Siegel, 2012). This informs the psychiatric profession who were troubled by the understanding that one's psychology and biology could be profoundly and permanently altered by traumatic experiences. This era was more prone to identify the resultant effects of trauma as malingering, moral weakness, or in many cases, the results of sin, which was readily espoused by writers such as Larry Crabb in his earlier writings (Crabb, 1988; Miller, 1995). More recently, both the scientific and psychological world see the results of trauma through an attachment and neurobiological lens, which serves to destigmatise the more observable reactions post-trauma exposure (Fishbane, 2013).

Neurobiological studies inform the present understanding of the body's response to stressful events and danger, which also can be expressed as a sense of impending danger even when there is no danger. The limbic system processes sense perceptions through the amygdala and the frontal lobe. The primitive reptilian brain responds to threat, or perceived threat, before the pre-frontal cortex (thinking brain) can respond. This means in the context of a sense of danger, the pre-frontal cortex is hijacked by the 'fight, flight, freeze, faint' response (Levine, 2015; Ogden et al., 2006; van der Kolk, 2014). van der Kolk also notes that when a person feels trapped or helpless, particularly when the traumatic events are continuing, they become "stuck in flight or fight" (p. 45). This means that stress hormones secreted during a threat are in constant activation, causing a range of psychological and physiological symptoms. In earlier writings Schauer and Elbert (2010, p. 109) proposed what

they coined a “cascade of freeze, flight, fight, fright, flag, faint” responses. The sequence of the responses depends on multiple factors, such as proximity to the threat and ability to react, which is influenced by gender, age, and strength. They note the impact of repeated traumatic events on the way in which both the parasympathetic and sympathetic nervous systems create a “fear network,” which informs the response sequence.

Certainly, in the clinical setting, persistent and unresolved trauma is recognised as a significant health condition, with the DSM-5 providing some guidelines for how trauma reactions present in the lives of those who have been exposed to traumatic events. The difference between PTSD and ASD is the time of onset, with ASD symptomology occurring within the first month, persisting for more than three days after the traumatic experience/s, and PTSD determined if ASD symptoms have persisted after a month. The diagnostic criteria include a history of exposure to traumatic events by witnessing or direct exposure to a traumatic event and repeated exposure to traumatic events as experienced by first responders (American Psychiatric Association, 2013). These include police, fire-fighters, crime scene and child abuse investigators, ambulance personnel and paramedics, search and rescue teams, chaplains, international aid workers, Red Cross workers, Medicines de Frontiers staff, UN peacekeepers, and field staff from Christian-based aid organisations like Samaritan’s Purse and World Vision (Fast, 2010). Added to this group could be journalists, counsellors, clergy, chaplains, and missionaries. While not all trauma-related events will result in ASD or PTSD, it is recognised that circumstances such as separation and loss, dislocation, poverty, persecution, and various forms of abuse, some of which are experienced by missionaries, can be enduring in their negative effects (Briere & Scott, 2015; Eriksson et al., 2012; Rosik & Borisov, 2010).

There are a multiplicity of ways in which the symptoms of trauma present physically, mentally, and spiritually which will have implications for missionaries on the field and their

early return. Briere and Scott (2015) and Sanderson (2013) mention the existential toll trauma takes, including faith crises, loss of meaning, critical awareness of the fragility of life, and the compromising of trust, hope, and personal care, which may develop into despair and pessimism. Psychologically, trauma is believed to be a precipitating factor in many diagnosable disorders, including depression, anxiety, panic attacks, major depressive episodes, complicated or traumatic grief, psychotic depression, phobias, stress disorders, PTSD, ASD, dissociation, derealisation, depersonalization, psychosis, substance use disorders, somatization, borderline personality disorder, narcissistic personality disorder, and antisocial personality disorder. Arguably, all personality disorders may have a source in traumatic experiences (American Psychiatric Association, 2013; Briere & Scott, 2015).

It is also known that trauma can express itself in a myriad of ways in the body. As described by the DSM-5, some of these include intrusive dreams, nightmares and memories, flashbacks, intense prolonged distress, anger outbursts, physical aggression, hypervigilance, exaggerated startle response, sleep and concentration problems, and physiological reactions. Further to this list can be added irrational fear, fatigue, avoidance behaviour, emotional reactivity, mood volatility, self-harming activities, fear of intimacy leading to the breakdown of intimate relationships, distortion of reality, impulsive behaviour, guilt, shame, and an inflated sense of responsibility (Briere & Scott, 2015; Fisher, 2017; Rothschild, 2011; Sanderson, 2013). The last decade has brought an increased understanding of the somatisation of trauma resulting in physical symptomology such as hormonal shifts, biochemical changes, muscle and ligament tension, gut problems, autoimmune diseases, and physical pain in general (Briere & Scott, 2015; Levine, 2010; Ogden et al., 2006; Siegel, 2012; van der Kolk, 2014).

Shapiro (2017, p. 39) formulated a helpful way of understanding how to classify traumatic events coining the term “big T” and “little t” trauma. Big T traumatic events would

encompass a Criterion A event according to the DSM-5, which indicates a possible diagnosis of PTSD. These would include such significant events as rape, war trauma, death of close family members and friends, life-threatening events, major accidents, natural disasters, geographic displacement, and divorce. Little t trauma is less definable as being traumatic in itself. However, humiliation by a teacher or work colleague, car accidents, bullying, medical diagnosis, or hospitalisation could be seen as little t events. The combination of the highly recognisable big T traumas along with multiple small t traumatic experiences have a cumulative effect on the limbic system leading to a trauma response. Given that missionaries may experience multiple big T and small t events, it is inevitable that for many, their psychological health is compromised.

As a result of numerous researchers investigating people's reactions to traumatic events, it is now known that the resultant emotional and physical expressions of trauma may not just disappear with time (Briere & Scott, 2015; Levine, 2010; Ogden et al., 2006; Siegel, 2012; van der Kolk, 2014). They generally are not resolved by the application of spiritual disciplines or trusting God, nor are they dissipated by immersion in hard work or distraction techniques, such as ones that are typically engaged by Christians (Panchuk, 2018). The emergence of research into the cumulative load of traumatic experiences, coupled with secondary traumatic stress and vicarious traumatisation, opens a new level of understanding as to why missionaries may be seriously impacted by the work in which they are involved and need to leave the field prematurely.

2.4.2 Cumulative Trauma

In some cases, trauma responses may result from accumulated exposure to threatening and stressful circumstances, although the individual circumstances may not be immediately life-threatening. Follette et al. (1996) coined the concept of Cumulative Trauma (CT), giving

understanding to those who experience multiple traumatic events of a different nature over a lifetime. It has been found that those who experience multiple traumas over a period of time are more likely to experience symptoms (Briere et al., 2016; Cloitre et al., 2009; Karam et al., 2014). Furthermore, a link was found between cumulative interpersonal traumas (intimate partner violence, assault, sexual assault, and robbery) and PTSD, with events such as natural disasters, accidents, and war less likely to result in PTSD. Of significance, it has been found that cumulative childhood traumas contribute to a complex range of symptoms when coupled with exposure to multiple traumatic events experienced in adulthood, which may result in a diagnosis of Complex PTSD (C-PTSD) (Cloitre et al., 2009; Lopes Cardozo, 2012). While a debate has ensued around the inclusion of C-PTSD in the DSM-5, it is generally accepted by those who have contributed to the vast knowledge around trauma that those who have experienced prolonged, repeated childhood trauma will experience a suite of symptoms which includes helplessness, terror, worthlessness, and a loss of a sense of self (Briere & Scott, 2015; Davediuk Gingrich, 2013; Herman, 1997; Sanderson, 2013; van der Kolk, 2005). They draw attention to the need for treatment protocols that look at the entire history of trauma rather than focusing on a single event. Briere and Scott (2015) note that some people experience multiple traumas throughout their adult life, the result of which may be “multiple symptomatic responses” (p. 22). Schmelzer (2018) adds that multiple traumatic events can result in a person “building a series of defences” which conserves energy and helps to withstand further onslaughts. Which she claims, that “instead of getting flooded by emotion- with terror, fear, and all the responses to it- we build walls, moats, and methods of escape. We go numb, feel nothing and do whatever we can to maintain our distance from ourselves and others” (p. 13). In considering the kinds of events missionaries experience, it is not unreasonable to conclude that some missionaries will experience multiple stressful and traumatic incidents, the effects of which may impact their length of service.

McEwen (1998) introduced the term “allostatic load”, which refers to the cumulative effects on the body of constantly being under attack or threat or of chronic stress. Allostasis is “the ability to achieve stability through change,” which is important for survival (p. 171). Elevated cortisol levels (the stress hormone) impact the body’s ability to regulate the autonomic nervous system, leading to possible autoimmune disease, as well as an elevated cardiovascular response leading to possible high blood pressure and heart attacks.

Given the politically unstable areas that some missionaries serve in, it is reasonable to suggest that many will have experienced multiple traumatic events, at times several concurrently. This is further impacted by possible exposure to events in childhood that would constitute C-PTSD. The frequency of natural disasters in some countries must also be considered, because they not only increase poverty but increase political instability and lawlessness, further putting the physical safety of missionaries at risk. In turn, the combination of experiencing such events may result in an inability to remain on the field.

2.4.3 Vicarious Trauma/ Secondary Traumatic Stress

Further, it is recognised that individuals can be affected by Vicarious Trauma (VT), which can occur when repeatedly hearing of the impact of traumatic experiences on others (McCann & Pearlman, 1990). The terms Vicarious Trauma and Secondary Traumatic Stress are used interchangeably in the literature. When VT occurs, beliefs about the self, others, and the world are disrupted, which indicates the potential for the development of guilt, excessive blaming, and spiritual crisis (Makadia et al., 2017). Isobel and Angus-Leppan (2018) note that VT occurs within the context of relationships and “usually occurs from sustained and repeated empathic engagement with individuals who have experienced trauma” (p. 388). Additionally, they acknowledge that VT accumulates slowly over time and mimics the trauma experiences of those they share a relationship with, altering perceptions of the world

with increasing cynicism, disillusionment, exhaustion, and apathy. They also state that those who experience VT may not have been exposed to a traumatic event themselves, reducing the possibility of recognising the core symptoms and causality. In light of their meta-analysis of 20 studies referring to VT, Cohen and Collens (2013) recognise the impact and increase of symptoms as a result of exposure to the trauma of others, which needs to be recognised by sending organisations. Organisationally VT may profoundly impact the effective involvement of both internal and external support staff during crisis situations.

Rance (2017) noted that 28.75% of the 254 missionaries surveyed had experienced vicarious trauma, some multiple times. She names the insidious nature of working in areas such as sex trafficking, which she powerfully describes as “infiltrating the helper’s soul” (p. 209). Such work takes an emotional toll on those who work in this area, with Christian organisations at the forefront of working with the estimated 45 million people worldwide who are the victims of human trafficking and slavery.

The nature of the work of missionaries includes building working relationships with nationals and meaningful friendships with local staff and neighbours. Therefore, it is reasonable to predict that friendships with those who suffer deeply due to exposure to traumatic situations will culminate in vicarious traumatisation. If a missionary is experiencing the same trauma, such as a destructive typhoon, and is meaningfully connected with others through shared experiences, the allostatic load is predictably increased.

Figley (1995) introduced the notion of Secondary Traumatic Stress (STS), which drew attention to the way in which trauma responses are replicated in caring professionals, despite not having experienced the same event as their clients. This included hyperarousal, numbing, and avoidance behaviours as well as altered mood and somatisation. Cummings et al. (2018, p. 1) note these responses as “psychological responses,” including exhaustion and avoidance behaviour which would be considered consistent with a diagnosis of PTSD.

Mordeno et al. (2017, p. 258) also found that STS replicated the “DSM-5’s PTSD symptoms of intrusion, avoidance, negative affect, anhedonia, externalizing behavior, anxious arousal, and dysphoric arousal.” They drew attention to the potential for severely disrupted functioning in those who have experienced constant exposure to the trauma of those with whom they work.

Isobel and Angus-Leppan (2018) and Rizkalla and Segal (2019) found that VT/STS resulted in decreased connection to the NGO which in turn affected various critical aspects of their physical and emotional health and interpersonal functioning. The impact of the ability for self-differentiation, that is, the ability to act thoughtfully under stress while staying in connection with others, is decreased when STS trauma-like symptoms are heightened (Bowen, 1978). This has implications for addressing trauma-related symptoms in those who work within a complex system of management and authority. A continuing resultant focus of researchers in this area is the recommendation for employers and agencies to recognise the risk factors for those working with and caring for those in crisis, in order to ameliorate attrition due to mental health break down (Rizkalla & Segal, 2019).

2.5 Loss and grief

According to Humphrey (2009), loss is defined as the deprivation of something meaningful, whether real or perceived, and Worden (2001) explains grief as the feelings experienced as a result of loss. Relocation of missionaries from one country to another, especially under duress, potentially results in significant loss, with the ensuing grief process evident in returning missionaries. Selby et al. (2009) name continual cycles of loss and perceived loss of control as significant issues for returning missionaries. According to Woodbridge (2017), missionaries face a unique set of circumstances that impact their experiences of loss and grief, which include the loss of the ability to communicate due to

limited language acquisition, which in turn compromises professional competency resulting in a loss of identity. Amongst an exhaustive list of situations of loss is the inaccessibility of family members in crisis, including serious illness and death in their home country, loss of access to good medical care, loss of expectations when team conflict emerges, changes in team personnel which means loss of friends, moving from one site to another, including forced relocation, traumatic experiences which bring a loss of safety, the death of friends and colleagues on the field, loss both physical and mental health, loss of children from the family home as they relocate in order to access education, loss of a visa to be able to stay in the country and political instability which means ousting from the country. All situations are named as having the potential to impact physical and mental health, taking a heavy toll on the serving missionaries.

The experience of loss for many missionaries is often accumulative; however, the added burden of traumatic loss increases the impact and the risk of significant impairment (Boelen et al., 2019). Traumatic loss is often a result of the death of a loved one under traumatic circumstances such as a murder, suicide, or acts of terrorism. Jacoby et al. (2019) propose that PTSD symptoms and prolonged grief disorder have a higher prevalence when there has been traumatic loss, which results in a compromised response to treatment protocols. Additionally, it was noted by Vallath et al. (2020) that their respondents stated that it was the losses experienced after the traumatic event that caused the psychological trauma, not the actual event itself, which was manageable at the time. This finding is significant when addressing the needs of missionaries after a traumatic event and their need for ongoing support.

Although grieving is seen as a normal process (Dooley et al., 2019; Murray, 2001; Worden, 2001) when it is coupled with the effects of trauma and what is known as traumatic loss, as well as experiences of multiple losses concurrently, missionaries may be at additional

risk of complicated grief. Complicated grief may present as depression, anxiety, suicidal ideation, anger, and substance abuse, as well as poor health outcomes as a result (Selby et al., 2009; Worden, 2001). Furthermore, the DSM-5 names a combination of 16 symptoms, including separation distress from a death, reactive distress as a result of the death, and the disruption of social identity, as contributing to Persistent Complex Bereavement Disorder.

In light of her experiences on the field, as well as her research findings, Woodbridge (2017) recommends that member care personnel be trained in grief counselling, which she suggests would reduce missionary attrition.

2.6 Humanitarian aid workers

An intensive review of the literature reveals that, to date, there has been limited research on the effects of traumatic experiences on those serving on the mission field. However, there is much evidence of the deleterious impact of the work that missionaries are involved in. Given the parallels between contemporary missionary work and that of other first responders (e.g., police, ambulance, paramedics, rescue squads, firepersons, members of the media, and chaplains), as well as humanitarian aid workers, it is reasonable to conclude that the adverse effects these first responders and humanitarian aid workers experience when confronted with trauma will likely be experienced by at least some missionaries on the field. The work of humanitarian aid workers in many ways is paralleled by missionary activities, with known and identified risks associated with humanitarian aid work well documented (Eriksson et al., 2012a; Eriksson et al., 2013; Fast, 2010; Rizkala & Segal, 2019; Stoddard et al., 2009; Veronese, & Pepe, 2017). In war-affected countries or those affected by natural disasters, aid workers and missionaries work side by side, differing only in their organisational affiliation.

Thus, the studies of humanitarian aid workers throw some light on the effects of traumatic events on the lives of those personnel. Security concerns such as sniper gunfire, bombings and kidnappings from insurgents, landmine injuries, violent assaults or sexual assault, transport accidents, deliberate destruction of homes or workplaces, life-threatening illness, and the murder of colleagues are named as the kinds of experiences identified by aid workers as being traumatic (Connorton et al., 2011; Lopes Cardoza, 2012). In 2008, 260 aid workers were killed, taken hostage and or seriously wounded in assaults (Eriksson et al., 2012b). The United Nations Office for the Coordination of Humanitarian Affairs (Harmer, 2018) notes that 139 aid workers were killed doing their jobs in 2017, and another 174 were the victims of serious attacks. They claim that, on average, 300 workers are affected by serious violence each year. A study of 312 German aid workers deployed overseas found that 47% of their number had experienced traumatic events, and another 7% had witnessed them (Jones et al., 2006). Out of this number 16% developed either full or partial PTSD. The conclusion was that personnel deployed to foreign countries experienced far more traumatic events than the general population. Fast (2010) asserts that humanitarian aid workers are increasingly the targets for violence and terrorism post 9/11, when political radicalisation threatened the security of the entire world. A notable difference from the attacks on and recorded deaths of aid workers pre-1998 was a marked increase in intentionality. Sheik et al. (2000) note that aid work had changed, as internal conflicts and anarchy dominated the work of aid organisations, with a significant increase in the deaths of relief workers from the previous years.

Eriksson et al. (2012b, p. 42) write that “indirect or secondary exposure to traumatic events has been associated with negative mental health outcomes in ex-patriate aid workers.” The internal consequences of trauma exposure in aid workers are reported to be depression, anxiety, hopelessness, PTSD, and burnout (Eriksson et al., 2012b; Lopez Cardozo et al.,

2012; Young et al., 2012). The consequences further result in worker attrition, team conflict, illness, and program ineffectiveness. More recently, Eriksson et al. (2014) have contended that aid workers on the ground are faced with insurmountable catastrophes, both natural disasters and the impact of humanity in the form of political regimes, instability, and civil unrest. They postulate that there is a high correlation between those working in areas recovering from both war and natural disasters with mental health issues such as depression, anxiety, and post-traumatic stress. A study of 277 humanitarian workers in South Sudan found that PTSD was diagnosed in 24% of respondents, depression in 39%, anxiety disorder in 28%, and emotional exhaustion in 24%, concluding that mental health disorders are present at alarming levels in this population (Strohmeier et al., 2018).

Humanitarian aid workers not only deal with human suffering at extreme levels but also contend with many other factors which make their years of service difficult, if not untenable. Apart from the undeniable impact of closely observing the suffering of others and their perceived powerlessness to make a difference, aid workers name working with other colleagues on the field as the most frequent stressor overall (Young et al., 2018). The respondents in this study name lazy or incompetent colleagues who do not work as a team but are more competitive in their approach to the work as being most difficult. Coupled with difficult teammates, ineffective field leaders, and poor management, with leaders named as inept, unjust, and authoritarian comprise a significant stressor. Also named in this study is the unhelpful organisational structure of the NGO, where pre-determined systems do not work in the specific context, and inadequate home office support is offered during crisis times. This also included a disconnection between the meaningful work on the field and the frustration of working with bureaucracy and poorly structured and implemented schemes that waste money (Lopes Cardozo et al., 2012; Young et al., 2018). Working with an effective and supportive NGO correlates positively with job satisfaction, thus reducing attrition rates.

Thus, while the risks faced by humanitarian aid workers have been noted by many researchers, those faced by the missionaries working alongside them are far less recognised, responded to and resolved. In light of the above, it is not unreasonable to suggest that missionaries exposed to traumatic events and experiences may in, some circumstances, experience significant and enduring consequences as extensively noted in humanitarian aid workers, and as a result, terminate their mission placement.

2.7 Tackling Attrition in humanitarian aid workers

The many studies which have addressed the cumulative load of stress and trauma in humanitarian aid workers have also made many recommendations that may help assess what may help address the attrition rate of Christian missionaries for the same reasons. Omidian (2001), studying the effects of Taliban insurgents on NGOs in Pakistan and Afghanistan, found that international workers were at high risk of mental health issues and stress-related illnesses. As a result of this study, mental health programs were set up for both national and international staff to offset the effects of such occurrences. This is in keeping with Rizkalla and Segal's (2019) and Strohmeier et al.'s (2018) recommendations that targeted support is needed to mitigate the impact of ongoing exposure to traumatic situations on mental and physical health.

The pessimistic attitudes of managers and coordinators, which led to depersonalisation were seen as a contributor to less cohesion in the team and a rise in mental health issues (Strohmeier et al., 2018). A managers' level of support and training was seen to act as a protective function for field staff (Ager, 2012). Effective and collaborative teamwork enhances mental well-being. Additional staff support services ameliorate some of the high stress levels and burnout rates of workers. These include having access to in-house staff counsellors, Employee Assistance Programs (EAP), organisation intranets that provide

multiple resources for managing stress and trauma, stress and trauma workshops, and avenues for social support (Curling & Simmons, 2010; Young et al., 2018). The importance of social support in enhancing psychological well-being is a significant component of retaining staff on the field. Therefore it is suggested that the use of the internet can be of assistance. However, this would mean addressing issues related to connectivity in more remote areas (Ager et al., 2012).

The high rate of mental health disorders in the population Strohmeier et al. (2018) investigated was found to result from chronic, cumulative stress, including exposure to multiple traumatic events. The recommendations from this study include visiting evacuation processes and policies and addressing security and work conditions from an organisational perspective. It is also suggested that prior to deployment, all staff need to be briefed on the impact of the work on relationships and their personal life, with an emphasis on maintaining a work-life balance and self-care while deployed (Ager, et al., 2012; Rizkala & Segal, 2019). It is recommended that organisations prepare their workers with training in trauma-related issues and that such training be designed and implemented (Jones et al., 2006; Young et al., 2018).

Of significance, it is recommended that organisations need to be cognisant of the role of their workers and develop programs that enhance the connection to their role in the work. This is important for mission organisations to note as many missionaries eventually work in roles for which they have no training and do not particularly like (Jones et al., 2006). For instance, the necessity for many missionary mothers to provide home schooling for their children falls into this category and negates their skills and training in other areas.

Veronese and Pepe (2017) propose that a sense of coherence (SOC) is essential to mitigate the effects of trauma and may act as a protective factor. The construct of sense of coherence (SOC) was developed by Antonovsky (1987) and is an adaptive personality

orientation used to explain why some individuals are better able than others to cope when experiencing traumatic events or unrelenting stress. When individuals see events as meaningful, predictable, and manageable, they can better accommodate the feelings of overwhelm and find the needed coping strategies. That implies a confidence that the struggles are an indicator of the worth of their involvement. Perhaps the notion of being called by God gives meaningful SOC, which assists in maintaining emotional health and service.

2.8 Stress and burnout leading to attrition

Research on humanitarian aid workers has focused on the results of their exposure to traumatic incidents and subsequent diagnosis of PTSD and trauma-related symptomatology, but Jachens et al. (2018) claim that little research has been conducted on the stress-related experiences of humanitarian aid workers. However, the work of Lopes Cardozo et al. (2012) is one study that highlights the impact of the difficult contexts in which they work on mental health, burnout, and psychological distress in general. In contrast, there is a conservative body of research on the effects of stress on missionaries, with the effects of stress in the life of a missionary being extensively written about by Schwandt and Moriarty (2008). Carter (1999) noted that cross-cultural workers reported more than twice the levels of stress that are normally associated with significant illness or burnout. While confrontation with those in leadership, relationship difficulties with other missionaries, diminished financial support, culture shock, and loneliness were named as contributing to missionaries' high stress levels, exposure to repeated trauma and vicarious trauma were not mentioned as factors contributing to attrition rates. Earlier, however, Miersma (1993) suggested that social, cultural, and geographical isolation, coupled with political volatility further increase the missionaries' exposure to trauma-related stressors. As early as 1999, Lewis Hall and

Schram drew attention to the increase in political uprisings, which brought forced migration and violence. This, in turn, impacted missionaries, bringing about the need for on the field crisis intervention. They also mention the ongoing impact of cumulative stressors common to working cross-culturally, as well as the more obvious impact of natural disasters and violence.

Eriksson et al. (2009) asserted that ongoing exposure to organisational stress coupled with traumatic events might lead to burnout. They also name burnout as a significant cause for missionary attrition, linking burnout to direct, as well as vicarious exposure to traumatic events. Interestingly their study also found that emotional exhaustion leading to burnout was directly related to organisational difficulties. They suggest that extensive studies in many different populations found that organisations may act in a preventative manner by giving social support and dealing with organisational dysfunction. They found that social support, as well as involvement in spiritual practices such as prayer counteracted the effects of burnout to some degree. Of significance, their findings note that younger workers were more likely to experience burnout while on the field, leading to attrition, and they suggest that specific training may ameliorate the effects of the trauma load experienced by these workers. This finding is supported by the research of Irvine et al. (2006), who noted that younger missionaries were more likely to report more stress than their older colleagues and less likely to stay longer-term on the field.

As previously discussed, McEwen (1998) drew attention to the allostatic load created by chronic stress, which he noted could possibly result in fatigue, aggression, irritability, discouragement, and an inability to respond appropriately to challenging situations. The increased risk factors for allostatic load, leading to increased risk for disease, is noted by Seeman et al. (2013), who cite the lack of control over one's environment as a contributor to chronic stress. Cousineau et al. (2010) add that there is no doubt the nature of missionary

work is stressful; its unpredictability, fluid hours, the multiplicity of needs and skills needed, and the prolonged nature of stress require a high level of resilience and mental stability.

Although several researchers have suggested that attention must be given to the effects of traumatic experiences on missionaries, there is limited evidence in the literature that this need has been addressed by any research of note (O'Donnell & O'Donnell, 2013; Rosik & Borisov, 2010). It is also possible that the concept of 'stress' could have been used interchangeably with trauma, thus requiring a clearer definition in the literature.

2.9 Psychological and interpersonal issues leading to attrition

Studies of missionary attrition consistently name team conflict and interpersonal relationships as significant contributing factors for missionaries returning home prematurely (Lee, 2019). In Rance's (2017) study of 245 missionaries, conflict was named as the sixth-highest type of trauma experienced, with Blocher (2007) naming it as one of the five top reasons for missionaries leaving the field. Of interest in this study, relational conflict was described as traumatic, not simply difficult or burdensome. Rance's study revealed that 51.8% of respondents had experienced a conflict with a colleague that they would name as traumatic. Dunaetz and Greenham (2018) name it as one of the most difficult issues to resolve, this being particularly confronting as it contradicts the Christian ideal of living and working in love, humility, and service. It is thought by Dunaetz (2010) that conflict in mission teams undermines the focus and work of the team and often leads to attrition. Rance also agreed that relational suffering is exacerbated as the participants felt that the conflicts should not happen amongst Christians. Camp et al. (2014) also found that participants reported that relationships on the field are very powerful and can impact health and well-being significantly. Participants in this study reported that they felt that often the goal of the mission was the most important factor to leadership and that people were expendable if they

got in the way of the goal or vision of the organisation. One respondent in this study reported that peer relationships could be the most important part of service, but they also could be the source of the greatest conflict.

Dunaetz and Greenham (2018) suggest that the accommodation of unworkable structures enforced by leaders is abusive. When this kind of abuse is evident, submission to authority is counterproductive to team unity and does not reduce the stress levels of the team members. They found that the practice of leaders making decisions that affect the team without due consultation, thus imposing conditions around their work and future, is destructive to team morale and cohesion. The continued expectation of acquiescing to the biblical principle of submission used to avoid conflict came with a serious cost to the ongoing function of the teams and, ultimately, individual missionaries. The tendency to encourage submission through bullying tactics or misuse of biblical text is named as a common theme when investigating team breakdown. Sadly, in one study, 39.9% of long-term medical missionaries left the field because of conflicted relationships with peers (Strand et al., 2015). Dunaetz (2010) considers that the lack of training in conflict management and resolution contributes to the catastrophic nature of team conflict, which is further exacerbated by the inaccessibility of people skilled and trained in conflict mediation.

Given that vicarious trauma can skew perceptions of self and others and lead to suspicion of those in leadership, it is not surprising that team conflict and breakdown significantly contribute to missionary attrition. While conflict can be caused or accentuated by incompatibility, Dunaetz (2010) suggests that at times, there is no actual incompatibility, only a perception that it exists. This is further fuelled by the notion that different orientations to tasks equals incompatibility and therefore is a problem when in fact, it may not be a problem but a strength. The breakdown of relationships (fuelled by misinterpreting motivations of other team members and those in leadership), as well as the replication of

trauma reactions as in secondary traumatic stress, create a highly problematic situation. It is apparent that those in organisational leadership lack the training and understanding of the impact that exposure to traumatic events has on the relationships and the volatile mix of autocratic leadership styles and personality traits in the 'hothouse' that field operations often are. Papero (1996) proposes that leaders can accelerate stress in organisations if they do not control their own emotional reactivity. When the focus is on the relational problem itself or a single person, any contribution of other individuals is ignored. Consequently, the resolution may be counterproductive or unnecessarily longer than it needs to be. Papero (1996) suggests that "skills developed to manage one's own emotional reactivity... can assist the individual and the leader's efforts to remain functional in the face of intense group instability" (p. 7).

Subsequently, it would appear that the relational capacity of both serving missionaries and their leaders is critical to the maintenance and survival of a team. While there are some missionaries who operate on their own in a mission capacity, most would work in teams comprising different interpersonal configurations. Some missionaries are sent to work within national teams and are the only, or one of very few, ex-patriates working in the organisation. Others work in teams comprised of members of the same sending organisation who, at times, are living in safe compounds. Still, others work in multi-disciplinary teams comprised of colleagues of different nationalities who are often from different sending organisations. At times, these arrangements coexist with a mix of nationals and ex-patriates working together on the same project. Some missionaries work under the auspices of an NGO with legitimate access to a country, particularly those who are in high-risk military zones.

Such a mixture of nationalities, faith expressions, organisations, training, and personalities is understandably often fraught with difficulty. The complexity of day-to-day hypervigilance around personal safety, language restrictions and confusions, nuanced cultural expressions, difficult climate, and living conditions is impacted by an overlay of how each

team member manages interpersonal relationships. The theory of attachment (Bowlby, 1997) gives some understanding of the nature of such difficulties.

2.10 Attachment Theory and interpersonal trauma

Attachment Theory, as proposed by John Bowlby (1997), posits that people are born with an innate longing for connection which motivates them to seek proximity to others, who are known as primary caregivers, in times of need. Bowlby (1997) proposed that people develop what is known as ‘attachment behaviours’, which means they seek comfort and protection in times of perceived threat or discomfort. Attachment Theory posits that repeated experiences with significant others lay down Internal Working Models (IWM) that are cognitive-affective representations of the attachment experiences of infancy, which become a framework of expectations that shape future relationships. Based on these principles, attachment theory provides a useful framework for an individual’s relational development to be reviewed and understood (Mikulincer & Shaver, 2012). It was found that inconsistent attachment experiences early in life contribute to less resilience when facing stressful situations and a predisposition to emotional breakdown in times of crisis.

It is important to note that Bowlby (1997) proposes that attachment systems are activated when danger is present. Bowlby suggested that attachment behaviours are those patterns laid down in childhood that allow an adult to develop safe relationships and operate with integrity when under threat. Given the proximity of most people working in mission teams, it is reasonable to deduce that under duress and threat, attachment systems are activated, which are counterproductive to team harmony and an individual sense of safety (Feeney, 2004). In a missional context, danger could be said to be within the mission community in the form of conflicted relationships or outside of it in the form of a natural disaster, war, or targeted attack on Christian minorities, to name just a few sources of threat.

Brisch (2014) proposes that stress hormones are activated when traumatic situations are faced, resulting in maladaptive reactions. This may render the individual unable to respond adequately as would be necessary in a difficult relationship issue. Feeney (2004) further notes the influence of attachment styles on the ability to regulate emotions during stressful situations. More specifically, she proposes that those with a secure attachment will be more able to ask for help when they become aware that they are struggling. Those with a dismissing attachment style will hide distress and not seek help, and those with an anxious-ambivalent style will have a more heightened response to the situation and express their distress more noticeably. Consequently, in demanding situations, the mix of attachment styles, coupled with previous attachment trauma, may create a destructive environment where individual needs are compromised.

Pistole and Arricale (2011), in their investigation of the effects of attachment systems during conflict in romantic relationships, deduced that individuals respond differently according to their attachment organisation. Those with a secure attachment are more likely to see conflict as a positive process, enabling the identification of difficulties which in turn leads to effective resolutions. When insecure attachments dominate, there is more scope for destructive reactions, including taking greater control, emotional reactivity, misinterpretation of motives, and damaging responses. Similar interactions and reactions may be noticed in a close-knit team of mission workers.

Understandably when team members work under stressful conditions and conflict, the productivity of the team is compromised with the work not progressing past the “pioneer stage” (Pross & Schweitzer, 2010, p. 100). They propose that this leads to “a general atmosphere of hostility, suspicion and mistrust” (p. 101) where amidst the chaos a scapegoat is sought in which to pin the blame. Given the high stress situations under which mission

workers can operate, viewing the situation through an attachment framework may be useful in finding ways ahead for a conflicted team.

When referring to humanitarian aid workers, Cardozo et al. (2012) suggest that those with pre-existing mental health conditions and those who have experienced childhood trauma are more at risk of depression and burnout. Interestingly, this study found that those who had experienced significant levels of childhood trauma were less at risk of depression post-deployment, with the suggestion that they had learnt to manage adversity during childhood which equipped them well for the hardships while deployed. This study also recommends that those diagnosed with mental health issues, who seek deployment, have available extra support and counselling pre-deployment.

In their seminal work on attachment, adverse childhood experiences (ACEs) (otherwise known as childhood trauma), and social networks, Wilkins et al. (2017) found that missionaries tend to be those who are drawn to vocations that have a high need for functional relationships. Their findings indicate that those with higher ACEs may have a predisposition towards developing stress or traumatic stress reactions in given situations because the nature of the work means they are in intimate proximity to others. The higher level of ACEs also correlated with attachment avoidance or attachment-related anxiety, which undoubtedly would affect team cohesiveness. Repeated patterns of attachment wounding lead to less ability to regulate emotions, which in turn may lead to burnout and or conflict with team members. The implication of this research has significance for sending organisations as an understanding of relational and attachment wounding may inform the difficulty individual differences have in maintaining sound working relationships which may lead to personnel leaving the field (Wilkins et al., 2017).

According to Karatzias et al. (2016), interpersonal trauma encompasses any relationship where one person causes trauma to another where the need for safety is violated.

This rupture may be the source of psychological distress and various disorders, including depression and anxiety. In their 2014 study, Forbes et al. write that interpersonal trauma is currently seen as a “global health emergency” (p. 147), thus giving credibility to the significant nature of the harm caused in the context of relationships. Bell et al. (2019) found that those who had experienced relational trauma presented with reduced trust in others even when there were signs that the other person was cooperative. They proposed that negative schemas around trustworthiness formed from past events influenced the perception of safety in all relationships. Schmelzer (2018) notes that historically trauma research in America has been centred around war veterans or situations that have involved groups of people, whereas treatment has focused on those who have suffered interpersonal trauma, such as child abuse, sexual abuse, domestic violence, and violations that have happened in the context of relationships. Follette et al. (2006), in their study of traumatic stress in missionaries, found that there appeared to be no difference in the impact of stressors regardless of whether they were relational or non-relational; however, they did note that interpersonal stressors amass to a greater impact overall. Furthermore, their study revealed that the single largest stressor reported was the breakdown of the relationship with supervisors or peers. This would be consistent with the research of Carter (1999), who also reported that relationship breakdown with managers and peers was the single biggest stressor reported by 1997 respondents in her study. This study also drew attention to the cumulative effect of ongoing relational dysfunction, which was exacerbated by the cross-cultural nature of the work of a missionary.

There are many frameworks through which to conceptualise the subsequent emotional distress missionaries experience as a result of encountering trauma on the mission field.

When considering the psychological distress experienced by some missionaries, frameworks provided by attachment theory and interpersonal trauma validate the observable breakdown of mental health. There is also evidence that pre-existing childhood trauma influences the

severity of symptomatology, but it is not within the scope of this research to investigate this (Herman, 1997).

2.11 Missionaries' experience of trauma

Christian missionaries appear to encounter experiences and events known to potentially elicit trauma responses and possibly even contribute to persistent mental health conditions such as PTSD. O'Donnell & O'Donnell (2013) note that a significant gap has been the "absence of a... framework that enables effective coordination identifies useful practices and flags potentially harmful practices and approaches to mental health" (p. 253). Rosik and Borisov (2010) assert that missionaries are in the high-risk cohort for trauma and PTSD because of the likelihood of exposure to traumatic events. Furthermore, they contend that if measures are not taken to ameliorate the effects of such events and the outcomes are ignored, the resultant attrition will be costly. As recently as 2020, Thom et al. suggested that exposure to traumatic events may result in a myriad of mental health presentations, including PTSD, depression, anxiety, and secondary traumatic stress, leading to attrition. Although noting that exposure to traumatic events is a significant predictor of attrition, their qualitative study examines the risk and resilience factors pertaining to Christian Cross-Cultural workers.

As far back as 1995, Grant wrote of missionary experiences "Without a missiology capable of integrating and making sense of direct experiences with inequality, oppression, injustice, violence, and most importantly evil, feelings of powerlessness and despair can become the norm" (p. 72). Furthermore, he posits that missionaries who have endured traumatic events have been bought home by well-meaning administrators who generously offer them sabbatical time, retreats or administrative positions back home, but the reason for their early return is scarcely asked. Without adequate intervention and rehabilitation,

unresolved trauma can leave the returning missionary with negative and enduring physical, emotional, and interpersonal impacts. Gallagher (2013) reinforces this view by writing,

The biblical mandate to "go therefore and make disciples of all the nations" (Matthew 28:19), should have come with this disclaimer: If you are a missionary in a conflict zone, your emotional and psychological well-being will be shredded, you will destroy your life as you currently know it and, by the way, you may be killed. Any romantic ideas about Christians traveling overseas on mission are patently false. (p. 1A)

A small amount of literature has reviewed the experiences of missionaries on the field, along with anecdotal evidence from missionaries themselves, which provides some insight into how trauma affects their lives. For example, Eriksson et al. (2012b) reported that 10% of all returning missionaries could be diagnosed with PTSD post-placement, with Bagley (2003) noting the need to address the experience of trauma among missionaries. Kotesky (2007), in his analysis of internet search engine data, found that of 25,740 enquiries on a Missionary Member Care website, 1,665 inquiries related to trauma, which suggests information is being sought and is needed concerning trauma exposure and missionary self-care. This further emphasises the need for research that specifically targets this issue from the perspective of those on the mission field.

Interestingly, Crawford and Wang (2016), in their *Brief History Psychology & Missions*, note that there has been a trend toward trauma-informed care of missionaries in crisis situations but go on to cite only two studies that delve more deeply, that of Irvine et al. in 2006 and Bagley in 2003. Irvine et al. (2006) surveyed 173 missionaries using a questionnaire to analyse what they refer to as traumatic stress (TS), which they define as "any stressor [acute or insidious] that is sufficient to overwhelm normal coping capacity" (p. 2). This included categories such as death, safety, catastrophe, personal crises, and the failure of

support systems, with 80% of those surveyed reporting having experienced one or more traumatic events during their time on the field. They also reported significant symptomatology up to a decade after exposure to the stressor/s.

Bagley (2003) used an anonymous questionnaire to survey 31 North American missionaries about their experience of trauma on the field. Among his findings, 94% of the participant missionaries reported experiencing at least one trauma during service, with 83% reporting that they had experienced multiple events. One respondent reported experiencing more than 20 single traumatic events. Of this cohort who reported having been through traumatic events, 24% could meet diagnosis for PTSD according to self-report. While establishing that missionaries do experience exposure to traumatic events much higher than the general population, with many also meeting criteria for PTSD, there is no indication in these studies that this exposure was the cause of attrition.

Schaefer et al. (2007, p. 530) wrote, "To the best of our knowledge, no study has been undertaken to examine trauma exposure and factors associated with post-traumatic stress among missionaries or aid workers while working long term in cross-cultural settings." In light of this, they investigated two missionary groups, one in Europe and the other in West Africa, to compare the difference in mental health presentations between working in a high-risk area and a low-risk, more stable political environment. This study revealed that the West African missionaries experienced traumatic events at the rate of 64% for females and 71% for males. In their examination of these populations using trauma and PTSD scales, they found that higher levels of exposure to traumatic events led to elevated PTSD symptomatology and widespread impairment. This study only investigated those still on the field despite their exposure to traumatic events and their accompanying diagnoses. There was no indication that other missionaries may have returned home because of the significant stress-related events, nor was there any investigation into this possible population. They state that missionaries are

mostly under-resourced, and there appears to be an assumption amongst their sending organisations that missionaries “possess unusual levels of adaptability, resilience to stressful situations and coping skills” (p. 536).

In their 2015 study, Strand, et al. again highlight the need for research in the area of mental health care for missionaries, in particular those involved in health care, including doctors. They suggest that exposure to natural disasters, war, terrorism, and disease epidemics increases the risk of mental health disorders, anxiety, and depression, in particular. Their self-report study of 393 serving missionaries notes uncertainty around whether those struggling with mental health disorders leave the field sooner than expected. In their recommendations, they suggest that sending organisations need to recognise the high likelihood of psychological impairment present in their staff.

Heffield’s 2016 study proposed that all international workers experienced high levels of stress which was further defined as traumatic distress. Furthermore, he offers a definition that states “any stressor significant enough to overwhelm normal coping capacity. It is not limited to a violent event or disaster, but also includes what they called system failure – a breakdown in relationships or leadership” (p. 15). The suddenness of an earthquake with the resultant devastation, including ongoing aftershocks, is noted as being a major global health problem. It is known that significant psychopathology emerges in the aftermath of a disaster such as an earthquake, resulting in a possible diagnosis of PTSD in up to 40% of the exposed population (Altindag et al., 2005; Massazza et al., 2019).

More recently, 254 missionaries were surveyed by Rance (2017) to investigate how many missionaries live through traumatic events, what types of trauma are endured, and what coping skills were employed to ameliorate the effects of the traumatic experiences. The study only surveyed those who claimed to have experienced a traumatic event, so 100% of the 254 participants had experienced at least one traumatic event while on the field. The types of

experiences encompassed violent crime, including, rape, robbery, assault, and the threat of violence, which included electronic surveillance. Of those surveyed, 59.8% had experienced one or more violent assaults at least once, with 69.1% experiencing a violent crime multiple times. Carjacking with weapons was named one of the most terrifying events, and when the whole family was at risk, the fear levels were elevated. The threat of homes or churches being burnt down with families inside was highlighted as a poignant reminder of the danger some missionaries work under. The threat of rape and awareness of health risks such as typhoid and HIV/AIDS, malaria, and tuberculosis was further exacerbated by the abundance of dangerous snakes in some countries. Bombs detonated nearby, religious and political extremists targeting white Christians, and being under constant surveillance served to heighten stress levels in this cohort. Of the 252 missionaries surveyed, more than half (52.8%) had experienced natural disasters, including tsunamis, earthquakes, volcanic eruptions, tornadoes, typhoons, and famine. Three-quarters of this group had survived multiple natural events that were potentially life-threatening. A poignant point Rance makes is that missionaries do not have time to process their own trauma reactions as they are immersed in relief work immediately. Driving on extremely dangerous roads, enduring traffic on motorbikes, and using planes that have low safety ratings were also named by participants as being traumatic, even more so as emergency service attention is haphazard and medical treatment is often sub-standard to western conditions. In fact, of those surveyed, 94% of respondents felt that they had experienced life-threatening levels of trauma. While this study did not look at whether missionaries returned from the field because of experiencing traumatic events, cumulative trauma, or vicarious trauma, it does, however, include a sample size that indicates the prevalence and kinds of such experiences while serving on the field. Again, while this study gives a significant overall picture of the extent of traumatic experiences, its Likert style,

internet survey does not convey the more profound effects of the experiences on the lives of missionaries and their families.

Given that missionaries commonly experience single incident traumatic events of both an interpersonal nature, as well as natural disasters and acts of war, it is also evident that the impact of consecutive and or concurrent traumatic events has a lasting impact.

Simultaneously the same missionary may also be experiencing vicarious traumatisation resulting from their purposeful connection with others, as well as chronic stress because of the multi-faceted nature of their work. However, in the case of missionaries, there is a dearth of contemporary research exploring how they cope with and adjust to trauma-related events and experiences while on the field (Bendiksen, 2015). There is also little phenomenological research exploring the implications of unrecognised, unmanaged, and or unresolved trauma concerning decision-making regarding the early return from field. Notably, earlier research has consistently recommended further study into the effects of trauma-based experiences on missionaries.

2.12 Missionary children

Missionary children are fondly known as missionary kids (MKs), or at times, third culture kids (TCKs) are also referred to as “global nomads,” recognising that they have sometimes lived in many countries and even continents (Klemens & Bikos, 2009). While living in a country where their parents are serving as missionaries, children are exposed to a broad range of cultures, languages, and values that most often develop a level of maturity, as well as a significantly broader worldview not found in their counterparts back home. MKs are traditionally known to thrive in the countries where they have lived, and most would consider themselves to have benefitted greatly from their missional experience (Kietzman et al., 2008). However, while often being multilingual and having travelled widely, which can positively

enhance development, the propensity for exposure to traumatic circumstances is much higher than for the average western population of young people. “MKs’ mobility and residence in often economically unstable countries can create vulnerabilities to potentially adverse and traumatic events. These events can include witnessing of violence, repetitive loss, and unresolved grief” (Kim et al., 2019, p. 1872). Reported in their findings is the indication that MKs on return to the sending country have “lower levels of psychological well-being, lower sociocultural adaptation, and greater interpersonal distance from others compared to non-MK college students” (p. 1873).

In investigating why some MKs have not remained in the faith, as expressed by their missionary parents, Kietzman et al. (2008) found that all but one of their 16 participants had experienced significant trauma while on the field, which included poverty and abandonment, as well as political and social violence and unrest. For some, the experience of personal abuse, sometimes at the hands of national caregivers, and the death of a family member further exacerbated the impact. In this study, participants described seeing horrific accidents and the bloodied bodies of people killed by insurgents or in accidents. They had memories of family members falling ill or having accidents and medical services being vastly inadequate or inaccessible, which in some cases was responsible for the death of loved ones.

Additionally, the sudden upheaval in their lives without preparation was named as also having a significant impact. This was at times because of political unrest where evacuations were mandated. Not knowing if loved ones were safe following forced separation contributed to yet another level of trauma for many.

Not only are MKs subjected to traumatic events themselves, but they are also aware of the dangers encountered when their parents work in countries that are hostile towards Christianity and persecuted for their faith. This has led to constant worry about the safety of

themselves and their family, including worries about parents being arrested (Kim et al., 2016).

2.13 Mental health stigma

A further complication to accurately collecting data regarding the impact of trauma on missionaries arises as they may differ in their acknowledgement and insight into the effects of their missionary work on their personal well-being. Hogstrom and Gingrich (2014) point out that “Missionaries, however, may not feel the freedom to even acknowledge the nature of the battles they face, let alone how defeated they may feel at times” (p. 240). Bagley (2003) also proposed that missionaries may traditionally under-report the psychological effects of their placements because the emotions felt do not fit with their construct of personal spirituality. Historically mental health, and in particular, behavioural science, has been at odds with mainstream Christian thinking, with fundamentalist evangelical scholars holding the field of psychology as secular with no place in churches or the mission field (Lewis Hall & Schram, 1999). Furthermore, Hartog and Gow (2005) note, “the historic relationship between psychology and religion has been characterized by conflict and mutual disregard” (p. 263). Understandably this perception has inhibited both mission organisations from recognising mental health issues in their members, as well as those on the field recognising a mental health basis to their difficulties and accessing the care they need.

Strand et al. (2015) draw attention to the difficulty health professionals face in acknowledging their own mental health issues, identifying stigmatisation, and fear of reprisal as mitigating factors. They also note that there is an expectation that missionaries have reputations as being spiritually strong, which makes it even more difficult to admit to themselves and others that they are struggling. The authors of this research contend that if the

mental health needs of medical personnel in their study had been effectively addressed, significant attrition of missionaries might have been averted.

More recently, Peteet (2019) wrote that religiosity reinforces mental health stigma that impedes access to treatment. A number of factors contribute to the suspicion of psychologically based treatments for mental health issues. This list includes previous unhelpful encounters with mental health providers; fundamentalism which purports that the Bible has all the answers for every problem, and the appropriation of mental illness to demon possession and sin, thus contending that psychology is the antithesis to biblical truth. Peteet also draws attention to religious communities as being ‘tribal’ in their expression, meaning *we take care of our own*, which essentially means anyone who seeks help outside of the community is shamed or ostracised. Misattribution of psychological issues is seen in fundamentalist communities, where personality disorders or psychopathology are seen to always have spiritual roots. This framework for approaching mental health issues may seriously impede a person’s access to appropriate medical attention or medication. Adams et al. (2018) also note that Christian fundamentalism is a significant predictor of the stigmatization of mental disorders.

The general suspicion of faith communities of psychological interventions for mental health issues is further outlined by Wamser et al. (2011). They write that in general, people in distress are more likely to access psychological help from friends, family, doctors, and clergy rather than psychiatrists or psychologists. They assert that those from faith communities are even more likely to reject professional help, with prayer believed to be more effective for treating depression than medication or therapy. Furthermore, their findings indicate a stigma attached to Christians admitting they were depressed as it could be seen as an admission that the individual is “less devout” (p. 229). This suspicion around accessing psychological resources is further supported by Hartog and Gow’s (2005) research into Christian beliefs

about mental disorders. They write, “religious communities have tended to foster stereotypical beliefs about health professionals, which in turn have influenced the uptake or non-uptake of mental-health services” (p. 263). With 38% of their 126 participants indicating that they believed that mental illness is synonymous with demon possession, it is little wonder that Christians in general, and professional missionaries in particular, would be hesitant to indicate to leaders that they were suffering mentally.

This being said, a growing acknowledgment of the compatibility of science and psychology with missions is noted by Lewis Hall and Schram (1999), as a less defensive stance has been taken by mental health professionals. There has been a growing engagement of psychological services in member care, a sophistication of pre-service assessment protocols, and work done to promote understanding of the distinctive features of mission work. Building on Lewis Hall and Schram’s work, Crawford and Wang’s (2016) more recent study indicates a pressing need for psychological care of missionaries to be better informed about care services that are culturally appropriate, given that mission team members are often culturally diverse. They also recommend that the difference in the cultural background of the mental health professional and the missionary needs to be addressed both in training and service provision.

Despite significant advances in the acceptance of the need for professional psychological services to support missionaries who are struggling David Selvey’s 2016 dissertation states,

The sufficiency of the Scriptures for handling the issues of life, is a core value of Faith Church and FGM. This core value leads to the belief that every believer can be equipped to provide biblical counseling to others. While every missionary may not have an active counseling ministry, FGM (Faith Global Ministries) expects each of its

missionaries to be equipped to apply biblical principles to their own life issues and relationships and to help those to whom they minister. (p. 200)

The prevalence of a theology around the “sufficiency” of the Bible to meet all problems in life can be found across the globe in mission organisations, this often being counterproductive to accessing professional services as well as early intervention in crisis situations. When considering the types of experiences missionaries encounter, it is clear that a narrow theology around mental health which leads to less access to mental health services comes at a cost to serving missionaries.

2.14 Protective Factors

Protective factors, write Marsden and Abell (2010, p. 224) “are the positive qualities within the cognitive, emotional, environmental, social, and spiritual experience of a person, which are associated with and cumulatively facilitate resilience”. These include parental warmth and support, supportive relationships, problem-solving ability, optimism, intelligence, social skills, and spirituality (Carlson et al., 2016; Marsden & Abell, 2010; Racine et al., 2020). Morrow (2001) categorises protective factors into three groups; individual factors, which include temperament, intelligence, and self-esteem; family factors, including dynamics within the family system, and parental warmth and care; external factors which include teachers and religious organisations. It is thought that social connections may help process traumatic events or may, at times, add to further distress if disclosure and conversation are discouraged (Carlson et al., 2016). The family system is important in sustaining psychological stability and acting as a protective factor for those experiencing inordinate stress (Sippel et al., 2015). Protective factors are the “building blocks of

resilience” (Brinkerhoff, 2017, p. 27), and by bolstering such factors, the individuals’ response to traumatic experiences will also be strengthened.

2.14.1 Resilience

Resilience is the ability to remain relatively emotionally stable and maintain physical and psychological functioning during and after a traumatic event. The theories of resilience arose from questions asked about why some people seem to thrive in the face of adversity as opposed to those who adopt destructive behaviours as a consequence of their traumatic experiences. Resilience theory proposes that stressors that produce change provide protection in the face of adversity and an avenue for personal growth (Bonanno, 2004; Madsen & Abell, 2010; Richardson, 2002). Rather than looking for the risk factors that contribute to difficulties, a paradigm shift identifying strengths that enable survival was explored in the early stages of the development of resilience theory (Benson, 1997).

In his meta-analysis, which draws together resilience theories, Richardson (2002) writes of a third-wave metatheory that integrates a multidisciplinary view of resilience. He acknowledges a transforming force within people which enables them to navigate difficult times as they seek wisdom, self-actualisation, altruism, and a connection to a spiritual source of strength. This theory proposes that resilience produces a framework that includes an innate moral compass that enables discernment as to what is right or wrong, as well as a love of others. This begins with trusting one’s intuition which may come from a spiritual source of strength but also incorporates the type of altruism, which desires to give back to society (Richardson, 2002). Stamoolis (2002) asserts that those who have a determination that God has called them to mission are particularly resilient during difficult circumstances, which enables them to stay on the field. This is further supported by Paas and Schoemaker (2018),

who assert that trusting God is foremost in building resilience and that trust is about understanding that the missionaries' work belongs to God and is His responsibility.

Resilience may also be strengthened when a person feels they have self-efficacy (Turner et al., 2021). Self-efficacy is formed when one perceives they are able to manage during difficult situations or have the skills necessary to problem solve or complete specific tasks. The belief that one can manage and survive difficult events is rooted in Bandura's (1997) social cognitive theory, which proposes that people have a self-system that enables some measure of control over their feelings, thoughts, and behaviour. Bandura (1997) proposed that the observation of the behaviour of others where they model helpful behaviours allows for the integration of learning systems that produce self-efficacy. Circumstances where workers need to perform duties outside their training and experience that require constant adaptation may challenge one's self-efficacy resulting in dysregulation and a loss of resilience. People who are more able to regulate behaviour and emotions and who have higher levels of adaptability report that they are more able to cope in a critical incident. Whether this resilience is shaped by the self-efficacy formed because of what has been learnt from managing previous traumatic incidents is difficult to know. However, it was found that self-efficacy is more innate and not formed in the application of stress reducing activities (Turner et al., 2021). It was found in this study that specific training in how to manage critical incidents increased overall self-efficacy and the participant's ability to cope in stressful situations.

Resilience is predicated on the support that is received from family, friends, colleagues, faith communities, and sending organisations which has a profound impact on the missionary's psychological health, physical health, and on the ability to deal with adversities and challenges (Paas & Schoemaker, 2018; Selby et al., 2009; Sippel et al., 2015). According to a vast amount of literature, social support can increase a sense of belonging, establish

healthy coping mechanisms and enable the regulation of emotions which leads to a reduction of mental health disorders (Sippel et al., 2015). The family system is paramount to the development of resilience with resiliency across the entire family, promoting resilience in the individual. Family members can be supported through difficult times by allowing others in the community to support them and by using the problem-solving strategies formed within the family system. Of note is the notion of arousal regulation being moderated during stressful situations by caregivers, as posited by attachment theorists, and the relationship to social supports as stress regulators during overwhelming circumstances. It is thought that social supports may enhance self-confidence and reduce the need for unhelpful or destructive coping strategies (Sippel et al., 2015).

Healthy coping mechanisms are found in regular exercise and physical fitness, according to Silverman and Deuster (2014), and act as a pathway to develop resilience in the face of stressful events. The physiological and psychological benefits of exercise and physical fitness are known to ameliorate the metabolic effects of chronic stress. Gerber and Puhse (2009) reviewed 31 journal articles, books, and book chapters, all of which supported the premise that exercise acts as a stress buffer. However, only two articles provided data that was consistent with surveying participants with very high levels of stress. Rosenbaum et al. (2015) assert that physical activity and exercise positively impact mental health. Based on their previous study of 81 inpatients who had experienced occupational PTSD, exercise was found to have significantly reduced PTSD symptoms (Rosenbaum et al., 2015). However, this trial was in a controlled environment, with a structured exercise program, with many other concurrent interventions. It is unknown whether exercise outside of a controlled environment and a structured program has efficacy in reducing PTSD-related symptoms.

Another protective factor is provided by the theory of attachment, as expanded by Mary Ainsworth (1985), which posits that secure attachments in adult relationships act as a

buffer during stressful times. Mills (2009, p. 6) asserts that “attachment theory has the ability to enhance our knowledge and understanding of how missionaries and their children deal with separations, loss, and grief,” with the attachment bonds developed in romantic partners forming a secure base to enable exploration and a safe haven to return to in case of threat (Hazan & Shaver, 1987).

Gingrich (2016) also discusses the importance of the family system, and in particular the marriage, in maintaining functioning, positing that positive family dynamics may overcome the inadequacies of early caregivers who can disrupt relationships. He says that the family system is essential for the readjustment all family members need to make when leaving established friends, community, and extended family in order to serve on the field. In saying this, he also proposes that this significant readjustment is more difficult than families may realise. Again the dependence on the strength of the family system is a moderator in the effects of the loss of support systems, as well as the stress of facing multiple stress factors on the field.

In their study of survivors of 9/11, Bonanno et al. (2007) report that “Specifically, resilience was more prevalent among people who reported no prior traumatic events, no recent life stressors, and no experience of additional traumatic events since September 11” (p. 679). This indicates that cumulative stress is associated with less resilience and an increased susceptibility to PTSD after a traumatic incident. However, Knight et al. (2000) indicate that exposure to previous traumatic events may provide a buffer to further psychological distress for some, as previous experiences may develop coping skills which may be utilised in subsequent events.

Bagley (2003) posited that, in general, missionaries have developed higher levels of adaptive coping skills, which include their commitment to God which may afford some measure of protection, as spiritual resources may be used to ameliorate the effects of

continual exposure to trauma. It is unclear in the missionary population whether resilience is created through traversing many past traumatic experiences and acts as a protective agent to maintain psychological stability, or conversely, whether the cumulative events experienced by missionaries contribute to having less resilience.

2.14.2 Post-traumatic growth

Post-traumatic growth is defined as the positive changes that occur in a person after they have experienced traumatic and challenging events, as opposed to the traditional emphasis on psychopathology as a result of traumatic experiences (Ayawickreme & Blackie, 2014; Joseph & Linley, 2006). Calhoun & Tedeschi (1999) offer a model for understanding growth that explains how goals, ways of negotiating distress, and beliefs are shattered by traumatic events and reconstructed as a way of making sense of the events. Interestingly, in their study of both student and community populations, it was found that those who expected their faith would make a difference in negotiating a traumatic event experienced that to be true. Major religions such as Christianity, Buddhism, Islam, and Judaism all posit that difficult and stressful situations can evoke positive change and that personal growth can result from suffering. Growth after experiencing adversity can be seen in three different domains; that of positive relationship changes with increased compassion towards others; secondly, an increased sense of self with a greater resiliency, strength, and wisdom and thirdly, an appreciation for life itself and all that each new day brings (Joseph & Linley, 2006). While post-traumatic growth may be experienced in several different domains, of particular interest to this research is the domain of spirituality. Schaefer et al. (2008) understand spirituality as “any motivation, attitude, belief, appraisal, practice, or behavior involving religious or spiritual content or processes” (p. 509). Healthy spirituality is

fundamental to well-being and the effectiveness of the work undertaken, and the promotion of post-traumatic growth (Cadell et al., 2003; O'Donnell & O'Donnell, 2013).

Therefore, after a traumatic event, meaning-making is critical in order to sustain one's view of themselves and the world (McCann & Pearlman, 1990), or perhaps it is essential to readjust one's worldview to be more consistent with reality. In essence, traumatic experiences shatter one's preconceived notions of the self, the world, and God and challenge one's worldview to the core. With this in mind, one's faith becomes pivotal in making sense of what has happened. Those who can link their difficulties to a theological stance around suffering may interpret difficult times as 'normal' given what they were accomplishing on the field following a call of God. Growth may not be directly linked to the trauma but results from what has been learnt through the challenges (Sanderson, 2013). Among the six noted signs of post-traumatic growth is the development of deeper connections with loved ones and friends, as often traumatic experiences have threatened those relationships, reduced dependency on material things, or both. She also proposes that when people are faced with life-threatening events, they are confronted with questions about life and death, which could be considered an existential crisis.

2.14.3 A theology of suffering

In the developing world or emerging countries, missionaries work cross-culturally and are confronted with human suffering on a level previously not encountered, especially if they have come from a Westernised country. Suffering can be viewed from two distinct behavioural states: enduring the emotional pain or the opposite state where the pain is suppressed or escaped from (Morse, 2001). Suffering viewed through both a cultural and religious lens may take on a variety of meanings and expressions. However, it is most often viewed through a normative western paradigm. This becomes problematic for those whose

thinking has been westernised as, for instance, suffering is very much seen as being a normal experience for those from a Buddhist tradition, and Buddha's teaching revolved around the existence of suffering. He taught that suffering in this life is to be expected and is an integral part of life that needs to be acknowledged as such. In the Hindu tradition, suffering is seen to be brought on by the wrong things a person has done or what is known as 'karma'. This may be something committed in this present life or a previous life; therefore, an emphasis is placed on goodness. Suffering in the form of physical pain is inescapable, but the soul is not affected (Whitman, 2007). The common thread through the major religions of Buddhism, Hinduism, and Islam is that suffering is a normal state of being and must be endured. In contrast, the western world has become desensitised to suffering with the hedonistic pursuit of pleasure and happiness.

Christianity also views suffering as a normal human experience, although God's original intent was for a perfect world, and suffering is the consequence of human disobedience (Genesis 3:1- 21). As a result, the Bible story is the journey of human suffering that culminates in the suffering death of Jesus on the cross. In more recent years, Christianity has been infiltrated by a gospel that is marked by the provision of physical health and financial prosperity, supported by a persistent faith that guarantees God's fulfilment of His promises (Hladky, 2012). This gospel is the antithesis of the church in the East. When missionaries come from a society where basic needs are catered for, and comfort and happiness are the personal agenda for the bulk of individuals, the move to a country where basic needs are not met, and suffering and hardship are the norm, those who seek to be involved in mission work might find this clash of cultures confronting.

The magnitude of hardship and pain observed regularly has prompted research into how aid workers cope with such exposure. However, there is no recognisable research into how Christian missionaries manage. Eriksson et al. (2014) claim that workers are unprepared

for the impact their daily work will have on both their worldview and their spirituality, although they note that spiritual traditions have a long history of helping people make sense of the difficulties experienced throughout life. McKay (2010) found that humanitarian aid workers will experience a faith crisis even when they do not claim to have a faith. She suggests that core values, assumptions about how the world works, and beliefs are challenged when injustice and suffering are encountered. This may come in the form of questions such as ‘Where is God in the midst of this?’ Further, she writes that being forced into close encounters with war, disasters, poverty, and violence forces one to question “The existence and identity of God or a transcendent power” (p. 14). Many people seek out God as a result of traumatic experiences in order to make meaning of those events (Shaw et al., 2005; Park, 2013)

Fowler’s (1995) stages of faith development help inform this faith trajectory as Wartenweiler and Eiroa-Orosa (2016) would propose that most people entering aid work would be at the ‘synthetic-conventional’ stage of faith. At this stage, one clearly understands the world they live in, and how God interacts with the world they are familiar with. Understandably this worldview is shaken when exposed to hardship, and suffering is beyond their realm of experience. “It seems that a confrontation with suffering is inescapable in humanitarian work, and it is an especially powerful catalyst for change” because it penetrates the deepest places in a person’s psyche and has the power to shatter worldviews, write Wartenweiler and Eiroa-Orosa (2016, p. 4). McKay (2010) suggests the faith crisis emerges when new experiences do not fit the more rigid assumptions about the world, which in turn challenges the individual’s belief structure. This may have a positive or negative impact, either a possible loss of faith or movement toward a later stage in Fowler’s model (Wartenweiler & Eiroa-Orosa, 2016). Whatever the outcome of the spiritual crisis, they propose that all who have experienced such spiritual challenges will potentially have

difficulty assimilating back into their sending church or former faith community on return from the field. Furthermore, any abuse or perceived abuse perpetrated in a religious context also challenges belief systems and may lead to “spiritual injury” (p. 276), the result of which may be the deepening of a faith experience or the loss of faith altogether. In her 2018 study, Panchuk considered the impact of what she has named “religious trauma” (p. 506) on one’s “spiritual self-concept” (p. 526), which leads to a loss of personal agency. Consequently, this kind of religious trauma may lead to guilt, shame, and fear, as well as disengagement from any kind of religious context, including God Himself.

Spiritual development is integral to psychological adjustment during times of adversity. Both one’s awareness of God and the maturity of the relationship with God contribute to a missionary’s psychosocial adjustment in their placement. Maintaining a consistent connection to God amid difficult times is an indicator of relational maturity and a contributor to resilience in the face of difficulties (Lewis Hall et al., 2006).

2.14.4 Spiritual coping

There is an emerging body of research that acknowledges that spirituality, a belief in God or a higher power, or religion, is an important domain for many people, although it appears that there is a lack of consensus amongst researchers as to a clear definition of these terms (Koenig, 2009; Pargament et al., 2003). Spirituality can have either a positive or a negative impact on one’s functioning and mental health. Spiritual belief systems are known to mitigate such mental health expressions as depression and suicidality (Rosmarin et al., 2013). They also propose that a belief in God helps to regulate emotions and facilitates the ability to see different perspectives in each situation. Pargament et al. (2000) assert that spirituality has also been shown to be a coping resource in times of distress. Conversely, other studies indicate that a spiritual framework may exacerbate feelings of guilt and anger

and lead to psychiatric disorders (Pargament et al., 2003; Rosmarin et al., 2013; Wamser et al., 2011).

According to Pargament et al. (2003), spiritual coping encompasses positive practices such as prayer, which redefines stressors as part of God's plan. Spiritual coping also looks to see if difficulties may be part of a closer walk with God or finding what lesson God has to teach. Those who look to a partnership with God for comfort may find that this relationship enables endurance, helps to find forgiveness, as well as a new direction in life. This study, however, notes more unhelpful coping strategies that suggest these may be anger and disappointment with God and others, questions about God's love and care for each individual or if, in fact, there is a God. Those with unhelpful coping strategies blame the devil for situations, and when they realise that God does not answer every prayer, they doubt if He answers prayer at all. In summary, Pargament and colleagues contend that along with the positive benefits of spiritual coping, there are also significant negative aspects to consider. Therefore, this changes the effectiveness of spiritual practices for some to ineffective and possibly dysfunctional and counterproductive forms of coping for others.

Is it possible that missionaries with a demonstrated faith in God, in general, have higher levels of resilience and are more able to cope with the impact of successive exposure to life-altering traumas? Given that the selected group in this study are Christian missionaries, it is presumed that a certain level of spiritual maturity is required as part of the selection process (Bagley, 2003; Barnett et al., 2005). It is also expected that this group will have spiritual resources such as prayer to utilise in difficult circumstances. In their study of 181 missionaries in 46 countries, Barnett et al. (2005) found that spiritual development contributed to positive psychological health as well as the cross-cultural social interaction required of a missionary on the field. According to Wilczewski et al. (2020), those with a

positive connection to God can negotiate traumatic events with an increased sense of mission brought about by a change in attitude and function in the new culture.

In studies on resilience in humanitarian aid workers, spirituality has become an important focus, with workers with a belief system less likely to use alcohol to cope with stress and trauma (Eriksson et al., 2014; Strohmeier et al., 2018). Lehmann and Steele (2020) propose that studies have consistently shown that religious coping has mediated the traumatic outcomes for those who have experienced such disasters as 9/11, Hurricane Katrina, and the Boxing Day Tsunami of 2004. However, like the Pargament et al. (2003) study, they draw attention to inconsistencies in the use of religious coping styles that have vastly different outcomes for adherents. Those with positive coping styles, where people worked together for the common good, were found to have experienced post-traumatic growth and more positive outcomes. They found active surrender, which is giving difficult situations to God, led to decreased psychological distress. Those with unhelpful religious coping strategies were correlated with more significant mental health symptomatology. Negative styles may see God as a punishing, vindictive God or give particular adherence to the impact of demonic activity. Similarly, Barnett et al. (2005) suggest there is a strong relationship between a lower, ambivalent connectedness to God and poorer psychological adjustment that manifests in problematic relationships throughout the missionary placement.

Wamser et al. (2011) suggest that there are two forms of religious coping: that of “deferred coping” when one expects that God will intervene in a situation and correct it, and “deistic coping” which holds the belief that God has given people the intellect to solve their own problems (p. 230). The latter group, they note, is more likely to access psychological help when in distress. For those who adopt a deferred coping stance, God is seen to be all the support they need in difficult circumstances. Overall, they found that Christians are reluctant to seek psychological support, with those who adopt a deferred coping stance expecting that

God will intervene in the situation. Subsequently, they will seek out those who will help them access God's intervention. Interestingly in their study, Wamser et al. (2011) found that those with a more deistic coping style did not access more psychological help but found assistance from internal problem-solving resources when in distress. Furthermore, Pargament et al. (2003) add an interesting diversion and question whether religious coping is helpful at all, arguing that religion could be part of the problem rather than the solution when faced with difficult circumstances. Their study of churchgoers found that those who were angry with God, were in conflicted relationships, or had doubts about their belief systems reported poorer mental health overall, meaning that when they confronted difficult life crises, they were less able to cope. Grant (1995) writes that in the case of missionaries, a difficulty lies in the fact

that they have been trained to be tough and not to let certain feelings affect them.

Frequently, considerable emotional and physical pain are repressed or offered up to God. In the case of some traumatic injuries, these attitudes can have life-threatening consequences. (p. 75)

More recently, Wilczewski et al. (2020) found that spirituality compensated for the loss of family connections and emotional support in the case of missionaries and helped with adjustment to a more dangerous environment. They also suggested that spiritual practices help missionaries cope with life-threatening and traumatic events, their participants citing many stories which apportioned safety to God's intervention. Paas and Schoemaker's (2018) participants identified "that God's grace is the source of missionary work and that God is responsible for the mission [missio Dei]" (p. 366), which in effect removes the pressure to solve crisis situations, instead finding strength in the belief that God would do that for them.

In effect, spiritual coping has many facets, which can have positive or negative effects on those experiencing overwhelmingly difficult situations. The literature tends to direct toward the need for spiritual formation, which is particularly pertinent for missionaries in training, given the high level of confronting events they experience while on the field (Hibbert, 2016). It is suggested by Wilczewski et al. (2020) that connection to God can be enhanced by spiritual practices such as prayer and sacramental practices, but also by engagement in spiritual retreats and conferences. Regarding Fowler's stages of faith development, attention to spiritual formation would enable potential missionaries to question belief systems within the safety of their home country while still connected to their support system.

2.14.5 Attachment to God

The concept of attachment to God, first introduced by Kirkpatrick (1992), may also impact how missionaries utilise spiritual coping strategies during difficult times and influence their behaviour towards others during conflict. Kirkpatrick (2005) proposed that “the experience of a relationship with God is the experience of a deep emotional bond” which enables a sense of “felt security” (p. 452). Furthermore, Miner (2009) suggests “that attachment to God has unique components which are not found in attachment to parents” (p. 122). Attachment theory proposes that emotional bonds are developed between a caregiver and a child during infancy (Bowlby, 1997), and attachment styles have been shown to influence the way individuals navigate difficulties and regulate their emotions when in challenging circumstances (Granqvist & Kirkpatrick, 2013).

The language around God as a father throughout the Bible indicates that God, in effect, psychologically functions as a stronger, wise parent who responds in ways similar to a human attachment figure. While “the idea of God is the idea of an absolutely adequate

attachment figure” (Kaufman, 1981, p. 67), the concept is fraught with difficulty if the childhood human attachment figure has been a source of danger, condemnation or is absent. Those with an insecure attachment experience during childhood may transfer their learned understanding of a father to Father God. This would include God as unavailable or a punishing God, uncertainty around lovability, and a God who abandons in times of need. The spiritual struggle around connection to God is supported by Zarzcka (2019), who indicates the correlation between poor parent-child attachment and spiritual and interpersonal struggles. Ellison et al. (2011) posit that insecure attachment may lead to compromised mental health, poorer well-being, and relationship difficulties, all of which have implications for those working in teams on the mission field. In fact, in their 2005 study, Hankin et al. demonstrate the link between insecure attachment styles and anxiety, depression, and relationship difficulties.

Conversely, those with a secure attachment to God are reported to have greater life satisfaction, fewer physical illnesses, and lower rates of anxiety and depression compared to those with an insecure attachment to God (Leman et al., 2018). According to Miner (2009), those with a secure childhood attachment, as well as a secure attachment to God as an adult, present with less depression and anxiety and “scored highest on existential well-being” (p. 122). Furthermore, Bradshaw et al. (2010) and Pargament et al. (1998) found that those with a secure attachment demonstrate less distress when facing stressful situations and less reactivity to social stressors compared to those with an insecure attachment to God. When faced with unrelenting difficulties and traumatic events, those with a secure attachment to God are more likely to use their relationship with God as a source of comfort, hold a belief in God’s intervention in difficult circumstances, and have a sense of God’s protection when in unsafe situations.

2.15 Member care

The concept of member care originated in the 1970s with the inclusion of pre-service psychometric testing and evaluations, which included the whole family (Crawford & Wang, 2016). O'Donnell was the first to coin the term member care providing this definition in his 1997 article:

Member care is the ongoing investment of resources by mission agencies, churches, and other mission organizations for the nurture and development of missionary personnel. It focuses on everyone in missions (missionaries, support staff, children, and families) and does so over the course of the missionary life-cycle, from recruitment through retirement. (p. 144)

According to Camp et al. (2014, p. 241), member care includes activities such as “counselling, crisis care, conflict resolution and debriefing” and providing preventative care in both formal and informal circumstances. Formal care is intentional in its approach, with online services emerging as being helpful, whereas informal care happens in the context of relationships and geographic proximity.

Irvine et al. (2006) reported that up to 75% of missionaries described a lack of support from sending organisations as having a lasting and permanent effect on their mental health and, more broadly, their placements. The impact of member care support provision is therefore of paramount importance.

Rosik et al. (2005) note in their research around member care that there has been a general dissatisfaction with the quality and availability of member care when on the field. They contend that research has been dated and limited in its scope and does not adequately address the needs of those on the field. Although their research is more recent, Camp et al. (2014)

observe that little has changed from their perspective, their respondents noting that care personnel were well-meaning but had little understanding of what their missionaries needed.

As the ReMAP II study indicated a pleasing 50% drop in missionary attrition in the 8 years since ReMAP I had been released, Camp et al. (2014) sought to study how effective member care practices were by examining the experiences of the missionaries themselves, rather than the mission agency leaders as the ReMAP projects had done. They note the uniqueness of the missionary population, listing a myriad of stressors they regularly face. Included in this list are cultural adjustments, living far from support systems, meeting organisational demands, burnout, relationship difficulties as well as marriage and children's difficulties. Curiously in this list of difficulties missionaries face, there is no mention of exposure to overwhelming and traumatic circumstances. They also draw attention to the lack of research that gathers missionaries' perspectives. They further maintain that as a result of this lack of investigation, it is difficult for member care to be informed by the experiences of missionaries, which could bring about improvements in services. In response to this research, Thom et al. (2019) also draw attention to the increase in stressors that cross-cultural workers face and the possibility "that (they) may lead to maladaptive responses, and subsequent behavioural health concerns, thereby warranting further study" (p. 203). With this in mind, they note that social support, including organisational support, can mitigate the effects of psychological distress in missionaries, with increased resilience being a product of such support. In support of the findings of Thom et al. (2019), earlier studies all demonstrate that effective member care impacts missionary attrition and improves the experience of those on the field (Andrews, 1999; Hay et al., 2007; Rosik et al., 2005).

The interesting result of Hogstrom and Gingrich's 2014 study of member care practices indicated that most of their 364 participants utilised the support of a colleague or friend during difficult times rather than seek out a mental health professional or a member

care worker. This finding also supported O'Donnell's (1995) earlier research which had a similar finding. Porter and Emmens (2009, p. 32) write that peer support has the "potential for preventing chronic and severe post-crisis stress" when analysing the results of studies of humanitarian aid workers.

2.16 Pre-service training

There is a dearth of more recent research into the training of missionaries, especially to investigate attrition, with Selvey's 2016 dissertation one of the few noting its importance. However, despite extensive study, he fails to investigate the impact of trauma on attrition rates and, therefore, the need for pre-service training in this area. His omission may have been influenced by his stance that one's faith practices and trust in biblical principles will negate the need for both training in, as well as mental health care of those suffering from trauma exposure.

In his 2019 paper, Lee asserted, "Going as a missionary or sending a missionary without proper training is quite reckless" (p. 247). However, the focus of his research was on preparation to work cross-culturally. His extensive research into attrition revealed that pre-service training needed to include training in conflict resolution and developing relational capacity to improve interpersonal relationships. He goes on to say that poor interpersonal relationships may lead to depression and ineffective service.

The need for pre-service training of missionaries in trauma is addressed by Makadia et al. (2016). Their unique study found that quality training in trauma symptoms directly impacted the development and severity of trauma symptomatology in workers. However, these workers were not specifically missionaries. Although they were unsure of what is meant by 'quality,' they assert that workers are better equipped to work alongside those who have experienced significant trauma and are more resilient if they had training in trauma

themselves. Connorton et al. (2012) and Wartenweiler and Eiroa-Orosa (2016) note that there has been a demand for more training and care within organisations as the effect of VT and PTSD is more clearly recognised. Connorton et al. (2012, p.147) further note, “Studies of nongovernment organisations indicated that pre-deployment preparation to prevent psychological stress in the field was limited, stress management practices in the field varied widely, and staff support resources were underdeveloped.” It is of concern that when Connorton et al. (2012) analysed five reports on organisations’ mental health literacy in humanitarian relief workers, they found there was no research into what pre-service training in preparation for traumatic incidents could be helpful. A search of current literature indicates that this is still the case. They suggest that the recommendation from the US military that all members be screened for mental disorders prior to service may be of some help to sending organisations.

Irvine et al. (2006) recommend organisations take note of their significant role when training missionaries so that traumatic stress is understood and, thus, its effects are mediated. In their findings, they also draw attention to the exit from the field of younger missionaries, suggesting that pre-service training in trauma using in-vivo exposure may serve to better prepare them and act as a safeguard towards early attrition. After analysing the response from 173 missionaries, their report recommends the preparation and subsequent care of missionaries in understanding the nature and effects of traumatic stress.

Dunaetz and Greenham (2018) recommend that all leaders should be trained in mediation and conflict resolution. However, it is apparent that leaders within the organisation may not be the best mediators in many situations, as holding dual roles makes impartiality difficult. The recommendation for third-party mediators who are readily accessible is helpful. This recommendation is also supported by Thom et al. (2019) who write,

we recommend that sending agencies consider requiring pre-field training that is intentionally directed at helping workers navigate conflict with teammates ...It is possible that the resources expended for pre-field training may prevent attrition by reducing the effects of these risk factors. (p. 211)

2.17 Member care recommendations

Due to an observed faith crisis in many returning Christian aid workers, Wartenweiler and Eiroa-Orosa (2016) recommend that as a part of a debriefing process, it is recognised that a returning missionary will have had significant spiritual challenges and changes. They propose that an empathic, non-judgemental holding space, which does not include argument or dogmatic theological debates, is the most helpful support strategy. It is possible that a new faith community may also need to be found. They also recommend that as part of the debriefing process, an assessment of the missionary's spiritual well-being is undertaken with the Spiritual Health Inventory suggested as a screening tool. Rosik et al. (2009) assessed the effectiveness of an intensive outpatient care program for returned missionaries as well as for clergy. This unique program provided their clients with three to four hours of counselling, three to four times a week. They draw attention to the exhausting and distressing nature of the work of missionaries and clergy, proposing that the need to be on call for others when they are distressed themselves may lead to burnout. A significant finding in this study was the desire for Christian workers to have a treatment program that understood and honoured their worldview and values. Jensma (2017, p. 238) also asserts that "A common belief held among missionaries is that once a person has participated in an overseas ex-pat community for several years, the person changes in ways that few mono-cultural people understand very fully." Both Jensma and Rosik and colleagues recognise the need for responses to the mental

health needs of missionaries to be provided by those who know and understand what it is like to serve on the field.

In their 2014 study Camp et al. found that inconsistency in member care was unhelpful. It seems that the exemplary care experienced in pre-service training and preparation was not continued throughout their term on the field, nor in their reorientation once back home. One participant in their study felt abandoned by the mission organisation on returning home. In discussing their findings, they note, “effective member care, from a missionary’s perspective, involves investments into the missionary through four channels: agency attunement, agency provision, relationships, and invested church partnerships- all of which operate outside of the missionary’s control” (p. 7). They recommend mental health supports need to be prepared by organisations, with training in psychological needs provided, to reduce the personal and financial cost of attrition. This would include contingency plans for crisis intervention and emergencies.

Elliot Stephens’ 2018 dissertation draws attention to the need for processes for leaders to be able to sufficiently onboard new missionaries to the field. His research highlighted the importance of orienting new staff so that they can thrive in their new setting. Harder and Foote (2016), in their survey of 1800 missionaries, concluded that 50% of the respondents indicated that their orientation process had been insufficient. Both studies, along with REMAP II indicate that poor onboarding processes may lead to difficulties once in service, which in turn may lead to attrition. Stephens proposes that mission organisations and leaders need to give attention to developing strategies for orienting new missionaries and release leaders to be able to fill that role. The finding that 100% of his respondents indicated that mentorship was of significant importance and indicates the necessity to provide early mentoring of new missionaries. This may involve training leaders in how to effectively mentor new missionaries and orient them to their new posting, as the participants in the

current study indicated that not all field mentors were helpful. It would appear that longevity on the field does not always indicate good practice or the ability to mentor others.

2.18 Further supports

In previous decades Critical Incident Stress Debriefing (CISD) has been the standard support strategy after a traumatic incident or major disaster. However, the understanding of the validity of its effectiveness was challenged post 9/11. Subsequent research indicated no significant difference in recovery and onset of PTSD symptoms between those engaged in debriefing and those not. Furthermore, it has been questioned whether the practice might actually interfere with the natural recovery process (McNally et al., 2003). As a result of these findings, psychological first aid (PFA) was developed, which was more aligned with the research understanding that psychoeducation, grounding techniques, safety, and connectedness were more important than simply talking through what had occurred (Benedek et al., 2006; Hay, 2007). In fact, therapists learnt that individuals have other needs, such as physical comfort and connection to their loved ones, that need to be addressed before any treatment or mental health intervention is offered (Bauwens & Tosone, 2010). The research of Bills et al. (2008) found that survivors of 9/11 refused psychological intervention immediately after the attacks because the retelling of the event retraumatized them. This is essential knowledge for those caring for the survivors of traumatic events on the field. Education must be available to all involved in recovery processes, support staff, and missionaries alike.

It is apparent that those on the field feel ill-equipped to support their friends and colleagues when it comes to more serious issues, which indicates the need for more pre-service education and training in areas previously suggested, such as mental health first aid and trauma-informed care (Hogstrom & Gingrich, 2014; O'Donnell, 1995; Porter & Emmens,

2009). Early intervention by 'in-house' support may act as a preventive for the need for more external mental health professionals or long-term care, as found by Bauwens and Tosone (2010). Respondents also expressed the need for intervention by those with previous on-field experiences as well as having some understanding of local culture (Hogstrom & Gingrich, 2014). However, it can be seen that there is a general suspicion around in-house psychological intervention, with concerns such as privacy, inadequate training, and a lack of genuine care and follow-up noted. When it came to member care, at times, there appeared to be experiences of leaders taking sides to protect the organisation, rather than support the individual. In general, when emergencies arose, members preferred counselling from outside the organisation, even though the care they experienced was reportedly less beneficial. The question is then raised about further training for those who care for members on the field, Hogstrom and Gingrich (2014) asserting that training is necessary for all who are in the role of member care.

The recommendations Lopes Cardozo et al. (2012) made to NGOs who deploy humanitarian aid workers have some bearing on mission sending organisations, as both aid workers and missionaries often share the same work. They recommend that chronic stressors can be alleviated by simple measures such as encouraging regular contact with their homeland, the provision of adequate accommodation, making the workload manageable, and improving communication with management teams. While these appear to be simple measures to put in place, it is clear that for all missionaries in training, mission leaders, and field directors, there is much to be learnt from the experiences of the participants in the current study.

Crawford and Wang (2016) note that despite more recent advances in recognition of the unique stressors of missionary life, more provision of trauma-informed and culturally sensitive psychological assistance is important in maintaining mission service. Furthermore,

Regueiro et al. (2016) suggest that the more recent developments in the ability to provide member care via video conferencing platforms are a helpful advancement in the care of missionaries. They note the need to address ethical issues, including privacy, needs to be considered, as connectivity to the internet might only be found in locations that do not allow for private conversations. Concern is also raised around the security of personal information, with some platforms that can be easily used across continents not offering encryption and, as such, do not meet registration standards of the mental health practitioner. Also noted are security risks from hackers, especially from opposing political or religious standpoints, which could put the missionary, their local team members, and their project at risk. However, much is to be said to confirm the advantages of the affordable and immediate care provided by telehealth services.

2.19 Summary

This literature review has provided a background to the concepts investigated in this study. There is little doubt that the traumatic experiences of some missionaries far exceed those of the general population and bear many similarities to those of first responders and international aid workers, where much research, along with recommendations, have been made. Through the search of the existing literature, there appears to be no qualitative study using missionaries themselves as a source of data that explores the feasibility of experiencing traumatic events as a reason why some missionaries return from the field earlier than expected.

This literature review has investigated what has been written about the call from God, which begins the journey a missionary takes prior to service. Pre-service training protocols have been examined, although there is scant academic research on what training entails. A comprehensive overview has been made of the current understanding of the impact of

experiencing traumatic events coupled with the further impact of cumulative events, vicarious trauma, secondary traumatic stress, interpersonal trauma, and loss on serving missionaries. Resilience which encompasses solid social supports has been touted as a known factor that keeps missionaries serving regardless of the extent of traumatic experiences. The use of spiritual practices has been known to help navigate difficult and overwhelming times. However, a shallow theological understanding of the place of suffering and rigid belief systems may be detrimental to maintaining sound mental health during adversity. The suspicion around using psychological services to assist in trauma recovery may also prevent those experiencing significant mental health breakdown may be counterproductive to well-being and recovery. The chapter investigates what has been recommended regarding pre-service training and what other sources may help reduce missionary attrition. The following chapter will provide a rationale for selecting and implementing this project's conceptual framework and methodology.

Chapter 3: Methodology/Method

3.1 Introduction

This chapter aims to outline the theoretical and philosophical foundations of this research into the phenomenon of missionary attrition. The study aims to understand if traumatic experiences could be the reason some missionaries have left the mission field earlier than expected and what may have prevented their early withdrawal from service. Although there has been some investigation into missionary attrition, it has been quantitative in its approach and has mostly gained data from organisational leaders rather than from the missionaries themselves. Previous research has strongly indicated that missionary attrition is a subject to be more closely investigated, particularly paying attention to missionaries who have returned early from service overseas. To date, there have been no qualitative studies exploring traumatic experiences as why some missionaries leave the field prematurely. To assess the impact of any traumatic experience, it is important to understand the organisational, social, and cultural contexts missionaries experience both on the field and prior to leaving the field. Understanding these contexts gives rise to making sense of the human phenomenon of attrition. In order to grasp how missionaries process these contexts and phenomena of attrition, it is important to situate a study within a theoretical and philosophical framework. A pragmatic approach was adopted wherein the research questions were roughly formulated, and a method for answering was then conceived at a later stage. The study's process is inductive, informed by the questions asked about phenomena in the collected data, as opposed to a deductive approach informed by an existing theory or research (Carter & Little, 2007).

3.2 Methodological orientation

3.2.1 Ontology and Epistemology

At the outset, the ontological and epistemological positioning of this study is explained. Hitchcock and Hughes (1995) suggest that ontology is about the social world and how it is understood. Epistemology is about knowing and the way in which knowledge is gained and communicated to others. There are many assumptions about how knowledge is formed, for instance, whether it is learnt by personal experience or taught by others.

Ontology invites the researcher to consider the social structures, values, beliefs, and expectations connected to the phenomena under examination (Bryman, 2012). It asks if assumptions are fixed and external to the individual's consciousness or whether they are "created in one's own mind" and, as such, accepted as the individual's valid reality (Cohen et al., 2011, p. 5). Thus, ontologically, the current study accepts that an individual's understanding of their own lived experience is an acceptable basis for research.

As Carter and Little (2007) explain, it is vital to prioritise the epistemological foundation of a study's chosen research method or approach. Epistemology is the theory of knowledge, or as Bernard (2006) notes, it is the way in which we know things. Lester (1999, p.1) writes, "Epistemologically, phenomenological approaches are based in a paradigm of personal knowledge and subjectivity and emphasise the importance of personal perspective and interpretation. As such, they are powerful for understanding subjective experience, gaining insights into people's motivations and actions." Thus, from an epistemological perspective, this study is drawn from an interpretivist paradigm, where the focus is on the meaning the participants bring to their circumstances to make sense of their world (Punch, 2014).

In contrast to positivism, interpretivism proposes that the social world, unlike the natural world, requires a different type of logic. Interpretive social science had its beginnings with Max Webber (1864- 1920) and Wilhem Dilthey (1833- 1911), who were German philosophers and sociologists. They proposed that empathetically understanding the everyday lived experience of people and how they act is meaningful research (Neuman, 1991). The focus subsequently is on the individual's understanding of what has happened rather than the reasons for its occurrence (Bryman, 2012). As such, interpretivism focuses on the meanings people bring to a given situation which inform the way they make sense of their world. Interpretivism is based in hermeneutics and attempts to "make the obscure plain" (Blaikie, 1993, p. 28).

3.2.2 Qualitative Research

In order to make sense of the participant's contexts and phenomena, a qualitative paradigm was employed in this study because qualitative research is concerned with making sense of the meanings people give to their individual circumstances. According to Valsiner and Connolly (2002), qualitative research is an attempt to understand the social world of people using descriptions of the experiences and world of those being studied. Accordingly, Denzin and Lincoln (2005, p. 3) define qualitative research as "a situated activity that locates the observer in the world. It consists of a set of interpretive material practices that make the world visible". They propose that qualitative research involves interviews, note-taking, conversations, photographs, and memos to self, which view the world through a series of representations. The researcher studies individuals in their natural setting and attempts to make sense of their world, as well as explore how the observed people make sense of their world. Bryman (2012) notes qualitative research is being more frequently used by social researchers as it focuses on words rather than numerical and quantifiable data as in

quantitative research. According to Morse (2012), this focus on words allows the researcher to say what the person was unable to say themselves. Additionally, Denzin and Lincoln (2005) contend that qualitative research thus gains a social justice perspective that 'humanises' the studied phenomena.

Unlike quantitative research, which focuses on large numbers, prediction, measurement, and generalising findings, qualitative researchers are interested in an in-depth understanding of behaviour that cannot be obtained using a quantitative approach. Due to the smaller sample sizes, quantitative researchers might argue that qualitative research does not apply to other situations and lacks statistical probability to support findings (Hoepfl, 1997). Similarly, Ryan-Nicholls and Will (2009), in their critique of qualitative research, contend that methodological rigour is not demonstrated by qualitative researchers but note that the standards used to judge the rigour of quantitative research do not apply to qualitative research. The use of quantitative criteria to measure the validity of qualitative research is also rejected by Rolfe (2006) and Smith et al. (2009). Quantitative research seeks to distance the researcher from the research content and process; on the other hand, a qualitative researcher is deeply immersed in the research and often becomes part of the analysis results, thus making the subjective nature of the research at odds with a more quantitative approach (Streubert & Carpenter, 2011). Notably, a qualitative paradigm seeks to affirm the reality constructed by an individual and accepts that there are multiple versions of the truth that are all valid (Finlay, 2006). The current study notes the negative evaluation of previous quantitative studies into missionary attrition which have been criticised for not delving more deeply into the experiences of missionaries on the field and for the lack of in-depth data from the missionaries themselves (Koteskey, 2007). As Ryan-Nicolls and Will (2009) encourage, this study will seek to find understanding and truth through engagement and interaction with

the participants as opposed to the more neutral disengagement of quantitative research, which has yet failed to produce meaningful data to inform the phenomena of missionary attrition.

3.2.3 Phenomenology

Phenomenology provides a methodological framework for this research, intending to “fully describe a lived experience” (Mapp, 2008, p. 305). Given the focus of the research questions, it was clear that a phenomenological framework would elicit key data, with Smith et al. (2009) noting that phenomenology explores the experiences of participants in their own terms, allowing investigators to not be restricted by narrow hypotheses and predefined categories. Phenomenologists want to learn what it is like to be the person being studied and what meanings they give to specific experiences (Munhall, 2007). For this reason, phenomenology as a choice of methodology in this research project allows for the in-depth study of the experiences of missionaries themselves. As already noted, previous investigations into missionary attrition have failed to include the stories of the missionaries themselves and have been quantitative, which only gains numbers but do not give insight into the more nuanced and less obvious reasons for missionaries leaving the field.

3.2.4 A brief history of phenomenology

Phenomenology grew as a questioning of and reaction to the traditional positivist, scientific view of how people view their worlds, and in particular, rejected French philosopher Descartes’ theory that objects can exist outside of a person’s consciousness (Bernard, 2006). The term ‘lived experience,’ most often used by phenomenological researchers, was coined by Edmond Husserl (1859- 1938). Husserl, who is generally accepted as the father of phenomenology, argued that certainty could be obtained through personal consciousness, and thus, phenomena are constructed out of people’s personal realities (Groenewald, 2004). Husserl proposed that a researcher could put aside any preconceived

notions about the phenomena being described and fully describe a person's lived experience (Mapp, 2008). In his exploration of the early thinkers in phenomenology, Groenewald (2004, p.5) writes, "The aim of the researcher is to describe as accurately as possible the phenomenon, refraining from any pre-given framework, remaining true to the facts". Or, in the words of Gee (2011, p. 9), "Phenomenology is concerned with how knowledge of the world is grasped by human beings," rather than explaining phenomena through assumptions and conventional wisdom. Pure phenomenology is rich in its description of real worlds and devoid of interpretation and analysis. Husserl believed that it was possible to separate preconceived notions from a person's present reality, reaching a state which he coined as the 'transcendental I,' where consciousness could be attained. Conversely, later philosophers such as Sartre, Heidegger, and Merleau-Ponty believed that this state was unattainable because it is impossible to entirely separate all suppositions and preconceived ideas to obtain an objective perspective of one's own experience (Davidsen, 2013).

Heidegger (1962) also challenged Husserl's thinking by introducing what is known as existential thought: making known that which is hidden. Heidegger believed that one must analyse one's own being to understand existence, so a researcher will always interpret data through their own knowledge and experiences. Supporting Heidegger's view, Davidsen (2013), writes that 'being there' as proposed by Heidegger "is an ontological term which describes the way in which humans are and understand themselves rather than what they are" (p. 322). As Heidegger began to displace Husserl's concept of understanding the self, new concepts around experiencing and understanding began to emerge. It was proposed that pre-existing understanding of culture, beliefs, and social structures impact the interpretation of present experience. As Davidsen (2013, p. 323) writes, "Our understanding is always rooted in a world of doings and practice."

Accordingly, leaving the mission field earlier than expected is the phenomenon being explored in this study. Paramount to the researcher making sense of the participants' lived experience of attrition is the important work of illuminating how they understand and make sense of their specific circumstances. This process has involved the telling and analysis of personal accounts of the experiences of these missionaries while on the field. Barker et al. (2002) maintain that taking this approach makes an allowance for unforeseen findings, which in the case of this study was significant.

3.3 Bracketing

Bracketing is a concern in phenomenological research. Streubert and Carpenter (2011) claim that the only way a pure phenomenon is found is when the researcher can bracket their assumptions and preconceived notions. Furthermore, according to Husserl, the only way the participants' lived experience could be considered scientific and generalisable is if the researcher identifies their own assumptions and puts them aside. Tymieniecka (2003) asserts that the only true way for the validity of the researcher's description to be tested would be by the participants themselves. However, Finlay (2006) contends that this is impossible in a simplistic form, and the researcher must intentionally examine their judgements, knowledge, and experiences instead of dismissing them lightly. She proposes that researchers could use their past and present experiences in a more helpful reflexive manner. Reflexivity, Bryman (2012, p. 39) writes, is the self-reflective capacity to acknowledge any biases and values brought into the research, claiming that it is impossible for research to be "value free" but will influence how the researcher will see things and indeed what they will see. Setting aside preconceived ideas helps the researcher to avoid trying to fit research findings into the preconceptions initially brought into the research (Pringle et al., 2011).

3.4 Interpretative Phenomenological Analysis (IPA)

IPA is phenomenological as it comes out of Husserl's directive to researchers "to go back to the things themselves" rather than relying on fixed understandings that have originated in the more predictable natural world (Eagleton, 1983, p. 55). IPA endeavours to examine how the lived experiences of participants are made sense of and understood, employing a process of deep examination by the researcher (Smith, 2014). According to Smith (2011), IPA's focus on the participant's subjective perception and recount of an event is valid, which means it does not attempt to construct an objective account of an event that may miss the more nuanced contexts of the situation.

The introduction of IPA came late in the research world, being introduced by Smith (1996) towards the end of the 20th century. The areas of health psychology and social science have rapidly adopted IPA as a methodology as it gives attention to the lived experiences of individuals rather than a simplistic biomedical model which relies on predictability (Brocki & Wearden, 2006). In health psychology, an emerging awareness of the importance of patients' understanding of their illness and how they interpret their experiences and the meanings given to them has given weight to IPA as a valuable contemporary research methodology. This move from a previous quantitative model has allowed for meaningful discourse around illness with a focus on "cause and effect" (p. 89).

IPA offers a systematic and careful approach to understanding the perspective of the participant through a process of intersubjective inquiry and analysis. At the outset, narrow units of analysis are adopted, which means that significant statements in the narrative are noted. A move to analysing the meaning of these statements follows with a detailed description of the participant's experience of finalising the analysis (Smith & Osborne, 2008). Once the ideas, thoughts, and feelings around an experience are noted for the individual

participant, the analysis is moved to the experiences of the group of participants as a whole. Meanings for the individual and the group are noted, with each meaning named as a theme. Themes will reflect a phenomenon that is important for the individual and give meaning to that phenomenon according to the participant's understanding. In the following level of analysis, emerging themes and what are called sub-ordinate themes, which identify broader categories, are identified (Smith & Osborne, 2008).

After carefully considering what the researcher was endeavouring to understand in the missionary population, IPA was chosen as the research methodology. In considering which qualitative method to adopt for this study, IPA was chosen over Grounded Theory (GT). Smith et al. (2009) note that GT is counted as one of the first methods qualitative researchers used and is focused on developing a theoretical account of a certain phenomenon. In considering GT as a methodology for this study, its sociological approach to the analysis of larger sample sizes was taken into consideration with the resultant decision that it was contradictory to the more detailed, finer analysis of a smaller sample size aligned with the aim of the project. Also, understanding at a group level is at the core of social processes, which are the concern of GT, which is at odds with the idiographic nature of IPA. The focus on the individual rather than the group is in keeping with the focus of this study. GT postulates that objective reality is the concern of the researcher, which assumes that social events and processes will take place regardless of the researcher's perspective and insight (Bryman, 2012). Conversely, IPA's focus on the participant's 'lived' experiences posits that people can have similar occurrences but experience them in radically different ways. In this study, the researcher is interested in the different ways missionaries experience a phenomenon.

Reid et al. (2005) propose that where an area has formerly lacked research, IPA is a constructive approach to adopt. In the area of missionary attrition as a result of traumatic

experiences, there appear to be no qualitative studies recorded and, therefore, none that examine the experiences of missionaries who have left the field. Brocki and Wearden (2006) note that when investigating a subject not previously investigated, IPA provides a platform for others who are in a similar situation to hear the stories of others, thus authenticating their own experience. It is hoped that in exploring the experience of some missionaries, there will be recognition and validation of the experiences of both participants and other missionaries, as well as sending organisations. In an investigation that seeks to understand the complexity of a missionaries' world, the philosophical basis of IPA provides a depth of investigation and interpretation, which brings to light some of the previously more obscure reasons for missionary attrition that have been recorded in quantitative studies. The use of IPA also gives a voice to missionaries anonymously, providing a platform for deeper self-disclosure, which may have a vital impact on future missionaries and their training and care on the field.

IPA views reality as subjective as it seeks to find the meaning people make out of their experiences rather than define what has happened or identify truth. As it simply relies on the subjective account of a participant's experience, IPA allows for the exploration of phenomena without needing a preconceived hypothesis to dictate the direction of the study. As there is no research of this kind into the lived experiences of returning Christian missionaries due to trauma, the possibility of unexpected results becomes feasible.

Phenomenology requires description, and in particular, IPA requires deep description and analysis, which Heidegger (1962) believed requires interpretation. In order to understand the interpretive approach, a framework is necessary, which introduces IPA's other theoretical underpinning in hermeneutics.

3.4.1 Hermeneutics

A significant component of IPA is hermeneutics which is the “study of how we understand and interpret our worlds” according to Gee (2011, p. 9) or, as Smith et al. (2009, p. 21) understand it, the “theory of interpretation.” Both propose that hermeneutics is the second major theoretical foundation of IPA. Being found largely in the humanities, hermeneutics “emphasizes a detailed reading or examination of text which could refer to a conversation, written words or pictures” (Neuman, 1991, p.68). Schleiermacher was the first in a series of thinkers to propose that interpreting text was an artform that may lead to the reader knowing more about the writer than the writer themselves. In light of this, it is possible for the reader to interpret meaning with an added perspective that comes from situating the text within the body of other similar texts (Smith et al., 2009). Gadamer (1996) added to the intellectual thinking around text, questioning Schleiermacher’s assertion that the reader could know the writer better than himself. He proposed that the meaning of the text is more important than an understanding of the person, wherein the historical gap between the event, the writing of the event, and the reader of the writing needs to be considered. Gadamer (1996) asserted that the past had a role in shaping the reader’s interpretation of the present phenomena.

A distinct concept within IPA’s use of hermeneutics is what is known as the “hermeneutic cycle,” write Smith et al. (2009, p. 27), who claim that to ascertain meaning, each word needs to be seen as part of the whole. In return, each sentence needs to be understood as a series of individual words that make up the whole. Therefore, each word meaning becomes clear only when seen in the context of the sentence. However, the meaning of the sentence is also seen as an accumulation of words, each with its own distinct meaning. For IPA researchers, the process of the analysis of data is iterative, meaning that the analysis is not linear and in straightforward steps. This distinct feature of IPA means the researcher

moves back and forth through the data looking for meaning from many different perspectives (Smith et al., 2009).

3.4.2 The Double Hermeneutic

A key component of IPA is what is known as a double hermeneutic, a two-stage process whereby the participant is attempting to understand their experiences, and the examiner is trying to understand how the participant makes sense of those experiences (Smith, 2014). This becomes the interpretive dimension of the phenomenological study. Brocki and Wearden (2006, p.88) write “that interpretations are thus bounded by participants’ abilities to articulate their thoughts and experiences adequately... and, it would follow, by the researcher’s ability to reflect and analyse.”

3.4.3 Ideography

A third theoretical component of IPA is its ideographic nature, with Smith et al. (2009, p. 29) proposing that ideography is “concerned with the particular.” They go on to say that there is a focus on grasping meaning, as well as trying to grasp an understanding of how a specific phenomenon was experienced. Therefore, an ideographic approach focuses on the cognitive, linguistic, affective, and physical being of the participant, using “thick description” to provide a symbolic representation of the experience (Neuman, 1991, p. 71). Geertz (1973) adds that thick descriptions may include the researcher’s notes and memos around the intentions, agency, and strategies of the participant, which may include the researcher’s personal reflections. A detailed examination of the words and experience of every participant is an essential component of IPA in order to understand how each phenomenon was experienced. Smith et al. (2009) propose that IPA aims to move away from generalisations toward explicit details of individual experiences. Smith (2014) notes that this process is completed one case study at a time. It is not until all perspectives are exhausted will the

researcher move to the next case study. Once all case studies have been examined in detail, the researcher may look for themes and divergences.

3.4.4 Limitations and criticisms of IPA

As with any emerging methodology, IPA has attracted some noteworthy criticism, drawing attention to some limitations in its use. Because language and the ability to articulate narrative fluently are a core part of IPA, participants must be able to communicate effectively, not just words but feelings and thoughts. Willig (2013) would say that this poses great difficulty for some and may rule out some participants. Smith et al. (2009) also contend that language limits the overall expression of experiences, as for some, there may be no words or accessible vocabulary to describe an experience or perceptions about that experience. Language itself can be used to construct reality, and in a research context, it is possible that what is gained is how people communicate their experience of an event rather than a factual understanding of the situation itself (Willig, 2013). Although, in the context of IPA, it is the way in which people talk about an experience that is of interest to the researcher, and how the words are used is the basis for analysis of each participant's experience (Smith, 2011).

The role of the interviewer comes into focus as, more generally, semi-structured interviews are the source for data collection. There is some contention concerning the lack of clarity around whether the interviewer takes a passive role in asking questions or whether there is an expectation that they will use more active listening techniques, including prompts and probes, to elicit deeper disclosure from the participant (Brocki & Wearden, 2006). For the researcher, this created a dilemma in conducting the interviews as she is a professional counsellor. The uncertainty about the appropriate level of probing for deeper disclosure featured in most interviews but was mediated by holding the frame of the research questions

closely in order not to deviate into a more counselling mode. Smith and Osborne (2003) confirm the researcher's approach suggesting that while the researcher must decide how much probing is appropriate, some of the more creative questioning may elicit the most valuable information which informs the investigation.

In his critique of IPA, Tuffour (2017) notes practical and theoretical limitations, contending that the focus on language is unhelpful and the findings are excessively influenced by the perceptions of the researcher. Wagstaff et al. (2014) also assert that IPA lacks a clear methodological process making it difficult to implement such components as the double hermeneutic and fully engage the theoretical and philosophical position of IPA. Furthermore, Brocki and Wearden (2006) contend that the results of the research are overly reliant on the researcher's ability to be able to interpret data. However, they note that different levels of interpretation may emphasise the level of importance the researcher ascribes to the topic and therefore allows for focusing on areas of interest to the researcher. This, Reid et al. (2005) note, is one of the strengths of IPA as its flexible and inductive approach allows for the emergence of new areas of interest. In terms of an analysis process, IPA is non-prescriptive, offering only broad guidelines from which to structure the analysis. For the beginning researcher, this can be confusing and fraught with concerns around whether the analysis is being carried out in the right way. However, the flexibility of this less structured approach allows for creativity and rich possibilities as long as the general principles of IPA are adhered to. This, of course, creates a dilemma around validity for the quantitative researcher who has strict measurable guidelines to adhere to. Larkin et al. (2006, p.103) propose that first time researchers may be attracted to IPA because of its perceived "accessibility, flexibility and applicability" but contend that it is easy for IPA to be used badly and more difficult to "do well." When used poorly, Larkin et al. (2006) contend that the researchers have only paid attention to first level analysis which looks at the participants'

narrative but does not engage in an interpretive or conceptual analysis. This involves a “critical and conceptual commentary” on how the participants have made sense of their circumstances, along with a more “speculative” approach from the investigator in the form of interpreting what it means (p. 104). This more speculative, sense-making approach is the source of criticism from those outside of a phenomenological theoretical approach to research. Hefferon and Gil-Rodriguez (2011) also agree with Larkin et al.’s critique proposing that IPA is often seen as a simple form of thematic analysis which, when used by new researchers, results in “poorly constructed, primarily descriptive projects” which do not incorporate interpretive component (p. 756).

3.5 Summary

In summary, the choice of IPA as a methodology for this study allows for a deep examination of the subjective accounts of the lived experiences of returned missionaries. Each case study was examined in isolation before common themes were identified. Whewn beginning the study, the researcher came with assumptions that were addressed and bracketed, allowing for an inductive process where no preconceived hypothesis was formulated prior to the study.

3.6 Research Method

3.6.1 Research Design

When identifying the research design for this project, the framework in which evidence was generated was considered (Bryman, 2012). As Punch (2014, p. 114) notes, the research design, “situates the researcher in the empirical world and connects the research questions to the data.” As such, Bryman (2012) asserts that there are five distinct research designs; experimental, which include quasi-experiments; cross-sectional which include surveys; longitudinal design; case study design; and comparative design. As this study endeavours to look at the data from several case studies in relation to a single phenomenon, it is not a study where experiments are involved, nor is it conducted over a period of time, or a study where comparison is the basis for the research. Consequently, this study is a cross-sectional design where several case studies are collected and examined in a similar timeframe. The data is quantifiable as it provides a benchmark for gauging variation and examines relationships between variables (Bryman, 2012).

3.6.2 Ethical considerations

This study was approved by the University of Notre Dame Australia Human Research Ethics Committee (HREC) under the requirements outlined in the National Statement on Ethical Conduct in Human Research (2014) (Appendix 1). Each participant was emailed an Invitation to Participate (Appendix 2); the Participant Information Sheet (Appendix 3); the Consent Form (Appendix 4), and the Demographics Information Sheet (Appendix 5) some time before the interview. They were asked to read it to understand and reflect on what they were considering participating in and to make contact with the researcher should they have any questions. Before the interview began, the components of the participation sheet were

discussed face to face, allowing the participant an opportunity to ask questions. The Consent Form was signed on each occasion prior to the start of the interview.

3.6.2.1 Emotional Support

The emotional safety of each participant was considered, as the likelihood of re-traumatisation was high, given the content of the interviews and experiences considered. Due care was given to each participant should the interview trigger distressing responses. The phone numbers for Lifeline¹ and Beyond Blue² were provided via the Participant Information Sheet so that participants experiencing any adverse effects as a result of their participation or for those who might wish to talk further about any arising issues or concerns, could have immediate access to support. Participants were informed that they could withdraw from the interview at any time, at which time they had the option to withdraw their interview data as well. In the Participant Information Sheet, the researcher agreed to provide suggestions of suitable follow-up counselling/support services should they be needed. This would be at no expense to the participant. In this study, no participants sought follow-up assistance after the interviews were completed.

The researcher also followed up with each participant with a phone call within a week of the interview to determine whether any additional support or contact may be needed. In the follow-up phone calls, all participants reported no adverse impact from the interviews and, in fact, claimed that the interviews had been a welcome and cathartic experience.

¹ *Lifeline* is a non-profit organisation that provides free, 24-hour Telephone Crisis Support service in Australia.

² Beyond Blue is an Australian mental health and wellbeing support organisation.

3.6.2.2 Identity Protection

For several reasons, deidentifying each participant, their country of service, and their sending organisation is of critical importance. Of significance was the number of participants serving in countries well known for their antagonism toward those of a Christian faith expression. Some were serving in war-torn countries where political insurgents and renegade groups constantly stirred up civil unrest and, at times, participated in either random or targeted attacks on civilians. Should country names and regions, as well as organisations be published, those still serving in the named countries and regions could be placed at serious risk of harm, the organisation ousted from the countries, and significant aid work and relationship building ceased. Additionally, the aim of this study is not to vilify organisations or publicly expose poor practice but to use the experiences of those who have been harmed by poor organisational practice to action changes for current and future missionaries.

In order to protect the identity of participants, names have been replaced by pseudonyms, and sending organisations have not been named. Diligence has been applied when specific situations which have been in the public literature have been discussed. In some cases, this has meant that critical information which was shared by the participants could not be used in the thesis as it was impossible to deidentify the people or the event. In addition, the transcriber signed a confidentiality agreement as the information being transcribed was of such a sensitive nature.

3.6.2.3 Benefits compared to potential risks

It was hoped that the content and process of the interviews would have a validating effect, providing each participant with an opportunity to reflect on his/her experiences on the mission field. Some participants shared that they had not told their story so extensively prior to the interview and found the experience of talking about it cathartic and validating. Kottler

(2014, p.2) writes that telling personal stories “Often highlights themes of growth, development, transformation and conflict resolution” and offers an opportunity for “exploration and connection,” which allows for interpretation and reinterpretation. The core tenets of Narrative Therapy, as voiced by Michael White (2002), indicate that the meanings attributed to experiences are the core of conversations that lead to healing in the counselling room. In a salient warning, White proposes that those who listen to such stories have a responsibility for the way in which expression is given to the meanings. He also draws attention to the power of catharsis, being one of “discharge and release” (p. 14). All participants hoped that the stories they shared would go towards the improvement of member care and training which would assist others as they engage in mission work. All participants expressed gratitude that their stories would be told, which could potentially make a difference for others.

For the missionary community and mission sending organisations and agencies, it is hoped that this study will bring to light the consequences of any lack of understanding of and preparation for the effects of traumatic experience/s on missionaries during their field placements. Furthermore, it is envisioned that this study will lead to more rigorous training about the nature and effects of trauma and the need for it to occur during the pre-placement phase. As a result, well-informed and rigorous member care practices might be developed for use during and after exposure to traumatic experiences during field placements. It is hoped that informal conversations and the publication of findings in peer-reviewed journals and presentations at relevant conferences will result in the development of and or review of current mission pre-placement training protocols, especially concerning the risks associated with trauma exposure in the mission field.

3.6.2.4 Potential risks to the researcher

The researcher is an experienced counsellor who teaches and provides treatment for those who have experienced trauma. She also has professional supervision in relation to this research and professional matters. The researcher has a supportive network of other counsellors, both professionally and personally, and sought debriefing with a professional supervisor after two particularly distressing interviews.

The risk of harm to the researcher, should the interview take place in a participant's home, was minimised by conducting all interviews in the daytime, always having a mobile phone on her person, and ensuring a responsible colleague or partner knew of the researcher's schedule and expected return time to home or office. There was also an agreement that a responsible colleague or partner would phone the researcher if there seemed to be an unreasonable delay in her return after the interview. This would be a person who could be available and accessible for backup if needed for debriefing.

3.6.2.5 Potential risks to the transcriber

As a result of her reaction to distressing content, the researcher was aware that the transcriber might have similar reactions, especially as she was not a mental health provider and was unaccustomed to transcribing such intense levels of disturbing content. This understanding resulted in several communications with the transcriber to ascertain any risk of harm and to debrief content. On one occasion, the transcriber accessed her workplace counselling service to debrief.

3.6.3 Sample

The selection of IPA as the methodology for this study allowed for purposeful homogenous sampling, that is, the selection of a small number of participants based on their missionary experiences rather than being randomly selected (Smith et al., 2009). Purposeful sampling means that participants were selected based on what they could contribute to the study and were chosen according to the researcher's judgement around their suitability for the project (Groenewald, 2004). All participants were Christians who had experienced trauma during their placement and had left due to their experiences. The researcher's early investigations into missionaries who had experienced trauma revealed that most research had taken place with Mormon missionaries who would not be generally accepted as sharing a Christian faith.³ For this study, 7 participants were selected from a number with whom contact had been made, although the sample size was not pre-determined. Smaller sample sizes are recommended by Smith (1996) as they allow for the exploration of phenomena in greater detail. The participants were required to have returned from their field placements earlier than expected and within the last five years of the interview. The participants were all Australian adults, ranging in age from 28 – 64 years, with five females and two males interviewed. Both the husband and wife were interviewed in two couples and, all but one participant was married. In all but one situation, children were also involved in the mission placement. Participants had served in countries other than Australia for between two and a half and 24 years; the mean years of service was 14 years. All were serving in Central Asia, Asia, and Pacific areas. Several Christian sending organisations were represented, some

³ Although those of a Mormon faith name their faith expression as Christian, there are many views held by Mormons that are not consistent with biblical understanding. In particular, they claim that the Book of Mormon, written by Joseph Smith, is the word of God and that the true church was established in 1830 (Fraser, 1977).

denominationally based, and others interdenominational. All participants were tertiary-educated professionals and were serving either partially or fully within the context of their profession. All but one participant had committed to serving on the field for potentially their entire life. Some lived and worked in secure compounds, and others lived and worked in small towns or larger cities. All worked in teams, some comprising nationals and ex-patriates and others in teams of ex-patriates from several different countries and NGOs.

The participants were found as a result of networking by the researcher, including snowballing, which is the use of the researcher's personal and professional network to recommend potential participants (Bryman, 2012; Smith et al., 2009). Some participants were sourced through emails sent to the researcher's personal and professional networks, and others were incidental recommendations from colleagues and acquaintances. Potential participants were contacted by phone or email, with several potential participants excluded because of having returned to Australia longer than five years before the interview time. Others were excluded because they had returned to Australia for natural reasons such as elderly parents, the end of a project, ill health, or children's schooling.

3.6.4 Data collection

In the present study, data was collected using in-depth face-to-face semi-structured interviews, which on the whole, took more than 2 hours for each participant (see Appendix 6). Semi-structured interviews are the most used form of data collection in IPA (Smith et al., 2009). Semi-structured interviews in qualitative studies are typically organised around a set of pre-determined open-ended questions (Smith, 2014; Willig, 2013). The more flexible structure of the interviews allows participants to talk at their own pace and tell narratives in a manner that is more authentic to the experiences they are describing. Establishing a safe and comfortable space and using the interviewer's skills to develop a sense of connectedness are

essential aspects of allowing a deeper level of shared narrative, with van Manen (1997) noting that the therapeutic alliance is an important component of phenomenological research. Kvale (1996, p. 19) describes this as the “interview as a conversation” and notes that an interview can take a similar form to a counselling session wherein the interviewer probes at a deeper level than mere facts, trying to ascertain meaning at an emotional level. For the interviewer, this became a quandary, as the ability to probe for deeper meaning came naturally as she is a counsellor. However, the struggle to stay in interview mode and not search for solutions to painful situations or responses was a challenge.

Each interview was audio-recorded using a second recorder as a back-up should the first recorder fail. Some interviews were conducted in the researcher’s counselling office, while others were conducted in private settings in the participants’ homes. The researcher travelled to the participants’ homes when they lived some distance from the researcher’s base and where privacy was guaranteed.

The audio-recordings were transcribed by a paid professional, but the researcher meticulously checked for errors against the audio recordings. The process of listening to the recordings several times and checking against the transcripts allowed for noting the tone of voice, pauses, racing descriptions, and deep times of emotion shown through broken voice, pauses, and sighs. This allowed the researcher to reflect and make further notes of the interviewing experience and the participant’s affect. The researcher also noted some of these experiences at the completion of the interviews. The content of many interviews was deeply moving and traumatic, requiring a process of emotional self-care for the researcher after the interview. As one interview progressed, the interviewer found herself wondering if the children of the participant survived a particular incident. Interestingly, the transcriber also communicated to the researcher that she found herself wanting to skip to the end of the recording to find out if the children were harmed.

3.6.5 Data Analysis

Data analysis began immediately after each interview, as prescribed by Maxwell (2005), with the researcher taking notes and reflecting on the interview process and content in a specific time set aside at the conclusion of the interview. NVivo Version 12 was used to analyse each transcript through multiple iterations of analysis.

Smith et al. (2009) have proposed a six-step process that was used as the guide for analysis:

1. Reading and re-reading

The first step in analysing data using IPA is immersion in the interview transcripts, which for this research included listening to the audio recordings of the interviews (Smith et al., 2009). The purpose of this level of immersion is to become familiar with the participant as the focus of the study and to become deeply embedded in their story. Starting with the first transcript, the researcher read it in its entirety while listening to the audio recording and correcting any subtle typing errors made by the transcriber. This was done a second time but in smaller chunks to allow each part of the interview to promote a deeper awareness of the subject. Successive rereading in smaller chunks gave further insight and familiarity with the scripts and the experience of the participant.

2. Initial noting

This phase is the most time-consuming and detailed phase, with no particular rules for its process (Smith et al., 2009). Detailed notes and comments about anything of interest in the transcript help to expand familiarity with the participant's experience. As this involves close analysis of semantics and language, it enables examination on two levels: that of a description of key elements as well as the meaning of those elements to the participant. Alongside these notes, the researcher also made notes about their own interpretation of the events and the participant's reactions. In this stage, comments were made on each transcript

using columns for the notes paying attention to the use of language in metaphors, recurrent words, and patterns.

3. Developing emergent themes

The third step in the analysis process, according to Smith et al. (2009), is developing emergent themes. They claim that by this stage, comprehensive exploratory notes will have been made, and using this large data set, themes will begin to emerge, which will set the direction of the next phase of the analysis. Using the software program NVivo 12 as an aid made this coding process a more simplified process for the researcher, allowing for multiple changes as coding progressed.

4. Searching for connections across emergent themes

In this stage, the researcher looks for themes that form groups or clusters of similar themes. As connections are sought, there is no prescriptive way of organising them. Once further transcripts were analysed, some of the earlier themes were re-evaluated and discarded (Smith et al., 2009).

5. Moving to the next case

Once the first transcript is analysed, the next step involves repeating the process with the remainder of the interviews. In successive transcript analysis the researcher needs to bracket the ideas and concepts emerging from previous interviews, thus treating each case on its own merit. Smith et al. (2009) suggest that following the rigor of the analysis in each case helps to allow new themes to emerge in each successive case study.

6. Looking for patterns across cases

The last stage, according to Smith and colleagues (2009), is identifying patterns across all transcripts. This means looking for patterns and possibly renaming or deleting themes. Once the coding had progressed to writing findings, some of the original codes could be simplified

or reorganised into newer super-ordinate themes. Multiple iterations of sub-ordinate themes continued through the analysis and writing stages.

3.6.6 Validity and Reliability

Reliability, validity, and the ability to be able to replicate the research findings are the three most prominent principles of social research (Bryman, 2012), with Kvale (1996, p. 229) calling them “the scientific holy trinity.” Longstanding quantitative researchers contend that it is impossible to gain objective knowledge through qualitative research methods such as phenomenology, constructivism, and pragmatism. Whereas the scientific basis for quantitative research relies on exact measures to justify its validity, qualitative research comes from an entirely different paradigm that rejects the more simplistic and prescriptive procedures of quantitative research (Smith et al., 2009; Yardley, 2017). As such, qualitative research challenges the epistemological assumptions of the scientific approach of quantitative measures providing a different approach to research. Interestingly, Pringle et al. (2011) propose that positivist researchers tend to report on the norm or the middle ground of findings, where more often than not, those who fall outside the norm are the ones who need greater attention. They go on to say that unless those who are not covered in the more quantitative studies are understood, patterns of behaviour cannot be addressed. Yardley (2017, p. 295) writes that qualitative research requires a rigour which “can be reliably quantified by different researchers in different people and contexts at different time-points”. She says that “the quality of qualitative research can be broadly grouped into four key dimensions: sensitivity to context; commitment and rigor; transparency and coherence; and impact and importance.”

With respect to the epistemological stance of qualitative research, Kvale (1996, p. 231) claims that “there are multiple ways of knowing and multiple truths” and rejects “the notion

of an objective universal truth.” He proposes that there are as many ways of interpreting data as there are researchers. However, Kotch (2006) proposed that trustworthiness must be established for qualitative research to be sound, which suggests that credibility, transferability, and dependability must be established. In support of Koch’s proposition, Lincoln and Guba (1985) go so far as to say that in shaking off positivism, the ordinary terms of trustworthiness, credibility, dependability, and confirmability need to be adopted. As a result, there are paradigm consistent ways of establishing the rigour and validity of qualitative research.

3.6.7 Credibility

Simply put, the credibility of a research project is found in how believable the findings are (Bryman, 2012). He proposes that multiple accounts of the same social reality support the credibility of the research.

Sandelowski asserts that:

A qualitative study is credible when it presents such faithful descriptions or interpretations of a human experience that the people having that experience would immediately recognise those descriptions or interpretations as their own. A study is also credible when other people can recognise the experience when confronted with it after having only read about it in a study. (1986, p. 32)

In this study, the researcher focused on describing the phenomena as it was told, ascribing to it the meaning the participants placed on it. This was achieved by reading and rereading each interview, reflecting on and clarifying content and meaning, as well as bracketing the researcher’s suppositions and preconceptions. The aim of the researcher was not to find one single truth or answer to issues but to provide a coherent and accurate account of the lived

experiences of the participants. In doing so, credibility should be established with the reader as the account should resonate with them.

3.6.8 Transferability

Traditional scientific research requires that generalisability is the ultimate goal of the research. However, the developers of IPA would contend that the focus should be on the transferability of the findings to similar groups (Smith, 2009). Transferability also partially relies on the reader's ability to contextualise the research findings to "their own personal and professional experience" (p. 51). This means that the reader should be able to identify with the rich descriptive accounts found in the data and transfer the findings to similar contexts. While not specifically aiming for transferability in this study, there is evidence that the findings may be valuable in providing sending organisations with insight into the attrition of some missionaries.

3.6.9 Dependability

Dependability, according to Lincoln and Guba (1985), is the way in which the steps undertaken in the research are transparent and explicit. Koch (2006) asserts that this can happen when a clear audit trail can be established, demonstrating how methods and decisions were made through evidence of documentation, notes, reflexive journals, and peer debriefing. Complete records of all phases of the research should be kept according to Bryman (2012), which could be assessed by peers during the research process.

In this research project, the researcher has kept a careful audit trail documenting the process, from the formation of the research questions to the proposal, the themes recorded on NVivo, and the final write-up. This includes journal notes from extensive reading, notes after each interview of the interviewer's impressions, notes from meetings with supervisors, process notes from each transcription, and all iterations of chapters produced during the

writing process. The final write-up includes a high percentage of direct quotes from the participants to maintain rigour and transparency.

3.6.10 Reflexivity

In social sciences, reflexivity has several meanings, with Bryman (2012) proposing that researchers need to be reflective about how their own biases, values, and knowledge influence how they understand the experiences of those they study. This will include considering the researcher's political, social, and cultural context. Reflexivity relies on the researcher to faithfully and accurately interpret the experiences of others, which Yardley (2008) proposes is essential to demonstrate the transparency and coherence of the research. Lynch (2000) adds that the researcher must have an introspective critical understanding of their own assumptions and beliefs and must acknowledge any relationships with the participants. van Manen (2014) posits that personal experience is a sound basis for phenomenological research as the awareness which comes from shared experiences provides directions that would not be otherwise considered. Eberle (2014) adds that the researcher's subjective experience may be a positive influence in the collection and generation of data. In their 2014 study, May and Perry wrestle with how the researcher's ability to be reflexive impacts their research projects, ultimately concluding that reflexivity is the role of the researcher in aiding interpretation. Importantly, they propose that "It does not legislate or seek closure and cannot be confined to one element of the research process, bracketed or appended; it is an iterative and continuous characteristic of good research practice" (p. 4). What then becomes important is how the researcher acknowledges and brackets their own experiences and assumptions formed from them. At the outset of this research project, the researcher examined her biases and preconceived notions about the lives of missionaries. This became an iterative process as each interview with a participant caused another level of

acknowledging the interviewer's personal experiences and understanding and then noting the need to bracket them.

The researcher, while not having served for long term on any mission field, has experienced several short-term mission undertakings to several Asian countries. While the aim of most trips was primarily education or supporting aid relief, her professional counselling skills and knowledge have always been woven into every trip. Significant times of formal and informal counselling have been included in every venture, giving insight into the world of those who serve on the field. In addition, part of the researcher's present counselling load is with Christian missionaries currently on the field. In this regard, the researcher's personal experience has enabled insight into the plight of missionaries from an intimate vantage point. This insight needed to be bracketed during the analysis stage of the study. The hardships and difficulties encountered by missionaries in their shared stories have caused the researcher to reorganise and reconsider her own faith journey, having encountered suffering at this deepest level. Existential questions arising from this examination of God's involvement in the plight of humanity, have led to learning from the faith stories of many missionaries. This has included actively witnessing God's day-to-day provision on many levels, which has engendered a more profound faith experience in the writer. At the same time, there has been a noticeable lack of support from sending organisations during difficult seasons, as well as a mistrust of said organisations and field support which has been gleaned from previous unhelpful experiences. This appeared to add to the ongoing distress of those who serve and the welcome experienced by the writer as she has taken the time to debrief and listen to stories as a person independent to any organisation. To this end, the writer has endeavoured not to be aligned with any particular organisation in her travels. Therefore, the assumptions formed about sending organisations as the result of my travels needed to be bracketed, as the participants in the current study had vastly different experiences with their

sending organisations to those that had been previously shared with me. My negative assumption that sending organisations were often disinterested and ill-informed in their decision making was challenged by the positive stories told by some participants.

My assumption that the levels of trauma experienced by missionaries would invariably lead to both mental and physical impairment was challenged by the resilience, perseverance, and faith of those who were interviewed. Listening to the more profound stories of perseverance in the face of terrible circumstances challenged my narrower understanding of the tenacity of the human spirit when mixed with a faith that invites God's protection. As a counsellor who works mainly in the secular field, I have had more experience with those who have experienced deep trauma and who have not had the resiliency formed out of an enduring faith. In fact, many of my clients, over the years, have blamed God for their circumstances and have cried out to an absent god for rescue. Often working with those who have been deeply hurt and traumatised by the behaviour or responses of family members and friends who would claim to have a Christian faith has left me with a rather disillusioned and, at times, judgemental attitude towards those who say they are Christians. Bringing this disenchantment into the stories of the participants in this study needed to be bracketed. Over the time of the interviews, I found myself pulled back and forth between two divergent perspectives, that of a loving God who cares deeply for His people and supports them and intervenes in tragic circumstances, to the stories of other participants who reinforced my preconceived assumptions.

I had also assumed that the mission field, in general, was a difficult place to be, with constant exposure to difficult situations, as that had been my personal experience. This was challenged by stories of peaceful and safe residency told by some participants and reinforced by their children's resistance to returning to Australia and the difficulty that had been experienced in returning to the complex Australian way of life.

As well as gaining insight into their world, the researcher has also experienced confronting traumatic events while visiting some countries. These have included being in a country at the height of civil war and having armed guards providing protection at every move and visiting two countries after the devastation of a tsunami. Encountering several security raids by local military police in countries where Christianity is outlawed, being followed by local military, and experiencing terrifying travel experiences in substandard transportation where many major accidents were witnessed. Rather than totally bracketing out the researcher's experiences, the small forays into the world of a missionary have enabled the use of questions that produced deeper disclosure from the participants and the ability to be able to self-disclose a little to the participants that my experiences were the reason the study was undertaken in the first place. This enabled what seemed to be a safe and contained place for the participants to share their stories. Coupled with this was how the researcher's experience enabled the analysis of the data using personal experience to influence the interpretive component of the analysis, while noting my assumptions and putting them aside.

3.6.11 Maintaining quality in interpretive phenomenological analysis

Phenomenological research incorporates diverse approaches, ranging from descriptive Husserlian phenomenology to more hermeneutic versions. As a qualitative approach grounded in phenomenology, IPA does not prescribe a recipe for its use, leaving the researcher able to adapt the method to their own use (Davidsen, 2013). Ontologically the use of IPA as a methodology leans toward a more hermeneutic approach; that is, it emphasises the participant's words and the meanings constructed by the researcher and the participant, and accepts the meanings as being valid (Smith et al., 2009). According to the key developers of IPA, Smith et al. (2009), traditional measures of quality are discouraged because they may not be consistent with the philosophical basis of IPA (vanScoy & Evenstad, 2014). As

previously stated, this study is drawn from the interpretivist approach, which accepts that there is no independently knowable reality.

The tendency to assess the quality of qualitative research using stable and universal criteria using a checklist approach discounts the participant's and researcher's interpretation of the phenomena being examined. Such a checklist approach is more aligned with positivism and its espousal of measurable and transferable results. The evaluation of the validity of some qualitative research is questioned by some from the positivist school of thought as it does not align with the mainstream approach to quantitative research, which has measurable and transferable results. One example is the traditional use of triangulation of data, where multiple sources of data are used to test the credibility of findings (Bryman, 2012). Yardley (2000) claims that this may compromise what she calls the "sensitivity to context" and the "commitment to rigour" (p. 219). Triangulation involves an attempt to find convergence from multiple sources of data to produce one truthful account. However, IPA does not seek to find a single truth or answer but a logically coherent account of the participant's narratives which has external credibility (Pringle et al., 2011). Guba and Lincoln (1994) argue that the notion of one single interpretation of a person's social world is flawed as there are no absolute truths in the social world, meaning there could be more than one interpretation of any given event. Kvale (2002) proposes that there are many ways of knowing and numerous truths. The inclusion of multiple forms of data and interpretations of the data in this study could reduce its credibility rather than provide a forum for further thought.

IPA acknowledges the researcher's centrality to analysis and his/her ability to reflect on and analyse the accounts that the interviews provide (Brocki & Wearden, 2006). The analytic process involves a double hermeneutic where the researcher makes sense of accounts of lived experiences told by participants, who in turn make sense of what is happening to them (Smith et al., 2009). In keeping with IPA, Brocki and Wearden claim that it may be inappropriate to

use standard measures of reliability to validate the researcher's interpretation of the data as there may be many ways of interpreting the data. The current study relies on both the thick descriptions of the lived experiences of the participants as well as the engagement and interpretation provided by the researcher. As such, the researcher has chosen to embed the study in an interpretivist paradigm that relies on the participant's narrative and the researcher's interpretation of their lived experience. The researcher aims to provide a believable representation of the participant's experiences, supported by excerpts from the interviews and a systematic and thorough ideographic engagement with the material. Further support can be found in the links to supporting literature in the literature review of the current study.

Another form of validation is called member validation, where the research findings can be discussed with the participants to check the credibility of the findings (Kvale & Brinkman, 2009). It is possible that this form of checking may invalidate the interpretive cycle of IPA used by the researcher. The writing could develop as purely descriptive if the participant questions any subtle discrepancies in the accounts caused by the researcher's interpretation (Morse et al., 2002). Therefore, it is possible that participants may influence the findings as they may be confused by understandings offered by the researcher which were not part of their own thinking (van Manen, 2014). The use of IPA for this study aimed to incorporate the past experiences of the researcher in a reflexive manner that acknowledges researcher bias and assumptions (Bryman, 2012; Lynch, 2000). Additionally, the content of many of the interviews was emotionally disturbing and laden with painful memories of the trauma experienced by the participants. The researcher's awareness that continued interactions with the traumatic memories may retraumatise the participants informed the decision not to involve the participants in further interactions, which may have involved

reading the transcripts or the findings. As a result, the researcher chose not to involve the participants to validate the findings.

Subsequently, the researcher validated the research findings using an independent audit, which included a collection of documents in addition to the initial recordings and transcripts gathered from the interviews (Kvale, 2002; Smith et al., 2009). According to Yin (1989), this collection of data enables a chain of evidence that could be followed by an independent person. This electronic trail of evidence included several iterations of the research questions, journals of the researcher's initial impressions immediately after the interviews, and extensive reflective commentaries derived from each transcription and recording (Shenton, 2004). These summaries were given to a supervisor who provided valuable feedback highlighting some additional subtle meanings found by the researcher. The interaction between the researcher and her supervisors also ensured continuous review of the analysis.

3.7 Summary

This study explored the experiences of missionaries who have returned prematurely from the mission field to investigate whether traumatic experiences may have influenced their unanticipated return. Using phenomenology as a theoretical framework, the researcher employed IPA to understand their lived experiences. Careful consideration was given to maintaining privacy over the identity of all participants and surrounding connections, as well as the exploration, ensuring that the research was carried out sensitively and respectfully due to the highly emotive subject matter. Participants were purposefully selected based on pre-determined criteria and interviewed using a semi-structured interview format. An inductive process of analysis using IPA as an analysis tool coded and identified emerging super-ordinate themes and subsequent sub-ordinate themes for each participant and finally for the group of participants.

The following chapter will present the study findings.

Chapter 4: Findings

4.1 Introduction

This chapter aims to present the findings of the phenomenological study of the lived experience of missionaries who have returned from the field earlier than expected. Interview transcripts were analysed using IPA with NVivo 12 used to store, arrange, and code the data collected from the transcribed interviews. The next step in the analysis of the data was to identify patterns, connections, and differences across the cases, which are identified as emergent themes. Following the order of the research questions, broad super-ordinate themes were identified where higher-order concepts were represented. According to Smith et al. (2009), a sub-ordinate theme is “a construct which usually applies to each participant” (p. 166). Subsequently, sub-ordinate themes were developed out of the overarching super-ordinate themes. The results of the data analysis will begin with a description of each super-ordinate theme. Further in the chapter, each theme will be discussed in more depth incorporating the deeper analysis included in the sub-ordinate themes.

Accompanying this discussion will be extracts from the participants’ transcribed interviews which Smith et al. (2009) propose supports the rigour and transparency of the study.

4.2 Participants in the study

Participants will be identified by pseudonyms with direct quotes from participants identified in italics. When the quote is inserted in a sentence, it is also identified by quotation marks (“ ”). Where the quote is longer, it is inserted as its own paragraph, identified by italics and indentation of the paragraph. The insertion of (...) within a quote is used to deidentify

people, organisations, cities, or countries. The use of ... indicates the deletion of text deemed to be irrelevant to the quote's context.

Table 2: Participant demographics

Pseudonym	age	Marital status	gender	Length of service (years)	Role	Reason for return	Children
Ana	44	M	F	4.5	Paediatric dietician	Cumulative trauma	2
Beth	28	M	F	2.5	Community Development	Earthquake	1
Charles	58	M	M	24	Academic	Team breakdown	2
Deb	60	M	F	24	Academic	Team breakdown	2
Eric	60	M	M	19.5	Teacher	Insurgent attack	4
Faith	64	M	F	19.5	Pre-school teacher	Insurgent attack	4
Grace	33	S	F	4	Psychologist	Team breakdown	0

4.3 Super-ordinate and sub-ordinate themes

Table 3: Super-ordinate Themes and Sub-ordinate Themes

Super-ordinate themes	Sub-ordinate themes
Theme 1	
4.2 The journey begins	4.2.1 The call
	4.2.2 Hearing the Call
	4.2.3 You don't just pack up and go
	4.2.4 Choosing a sending organisation
	4.2.5 Training
	4.2.6 Finally here
	4.2.7 In the right place
	4.2.8 Orientation
Theme 2	
4.3 The unimaginable happens	4.3.1 Terrorist attacks/ Political unrest
	4.3.2 Natural disasters
	4.3.3 Cultural practices
	4.3.4 Health issues/Accidents
	4.3.5 Relational trauma
	4.3.6 Cumulative stressors
Theme 3	
4.4 The fallout	4.4.1 The emotional toll
	4.4.2 The physical impact
	4.4.3 The spiritual impact
	4.4.4 Impact on the children
	4.4.5 Loss and grief
	4.4.6 Leaving the field
	4.4.7 Back home
Theme 4	
4.5 Survival in the face of the overwhelming	4.5.1 Protective factors
	4.5.1.1 Resilience
	4.5.1.2 Trusting God
	4.5.2 Sources of help
	4.5.3 When help did not come
Theme 5	
4.6 Preventing Attrition	4.6.1 Pre-service training
	4.6.2 What was needed
4.7 Conclusion	

Theme one, “the journey begins,” draws attention to the significance of the reason why the participants were on the field. Pursuing a vocation as a missionary is more than just a job where one purposefully trains for a career pathway or takes a job as a means to an end,

namely an income. The perceived vocational call from God as a motivation for service was evident in all participants. This call enabled them to fulfil lifetime dreams or, for some, be available for whatever they felt God had asked them to do. The participants' confidence in this call was further supported by events outside of their control which they perceived as clear indicators that they were following exactly what God wanted them to do. This is a significant theme for each participant and validates the importance of this study, as returning from the field earlier than proposed indicates an interruption to the perceived call of God to mission.

The subsequent theme, "the unimaginable happens," details the events that led to each missionary coming home. These often-untold narratives give insight into events or team dysfunction that was beyond the resources of the participants to manage. Theme three gives an understanding of the broad impact of these events, including the psychological, physical, and spiritual impact, as well as noting the impact on the children of the participants. The impact of the trauma-related events eventually led to the subsequent decision to leave the field. However, some participants found their faith a sustaining factor in the face of adversity. Support and help came from surprising sources as well as what could be reasonably expected from the sending organisation, family, and friends, which is covered in theme four.

Theme five captures the participants' discussion of how their pre-service training assisted them during and after the difficult events experienced. They noted what knowledge and understanding were missing in their training and what they wished they had known prior to the difficult experiences. Finally, participants shared what they thought may have helped them during and after those experiences.

4.4 Theme 1: The Journey begins

The first theme provides the background of the course of action the participants took, which culminated in their first experiences on the field. This course was significantly fuelled by a sense of doing what God had asked them to do, believing that God had opened doors for them to follow His call.

4.4.1 The Call

Each participant discussed their relocation to another country as a ‘call’ and, as they were all Christians, that was further defined as a specific call from God. This call came in different forms and was delivered through different means. However, each participant was motivated by a desire to serve God and a willingness to do so in whichever specific context they felt drawn to by God.

Ana spoke quite considerably about the original call to the mission field, which came when at age 16, she began to think about what she would do at university after she left school. She specifically used the word ‘call,’ which the interviewer did not initiate. Her subject choice for her senior years at school was prompted by a guest speaker at her church the night before her subject choice forms needed to be submitted at school. The speaker spoke about things that ignited her interest *“I’d been thinking I want to serve God and I love different cultures and I love nutrition.”* Ana had explored different aspects of serving in a medical capacity, but her dislike of all things to do with surgery and wound care enabled an easy transition to train to be a dietitian and nutritionist following the lead of the guest speaker she had heard.

Her determination to follow this pathway further informed her choice of a life partner: *So I felt that from 16 and I met my husband at 17 and I said to him, ‘I don’t want to waste your time unless you want to be a missionary going to [country] to care for*

malnourished kids' and he went 'oh that sounds good, I grew up in ...(a different developing nation).'

Together they planned a future of service on the mission field, with Ana's husband training to be an environmental scientist and Ana training to be a nutritionist. After graduation, they planned a short-term trip of five months to an Asian country to confirm that they "*were right fit for the mission field.*" The focus of their planning was to make sure of their calling before having children and before committing to long-term service.

Several missionaries in Ana's church had served in a particular country, which planted a desire to serve there as well. Their stories on return to Australia inspired her curiosity and ongoing desire to go there. This was coupled with the fact that her husband had also been there with friends in a gap year before starting university. So strong was her desire to go to that specific country that she prayed, "*When's my turn Lord when's my turn to go because I want to be part of this so.*"

The significance of early exposure to overseas mission continued to be reinforced by Beth's story of how she ended up on the mission field. Beth's lifetime dream was to be involved in mission work, "*for as long as I can remember since being a young girl I have always wanted to work overseas and work cross-culturally,*" believing that "*God just gave me a heart for people and particularly for people living in poverty.*" Like Ana growing up in the church gave Beth much exposure to mission and poverty through organisations such as World Vision which organised fundraisers such as the 40 Hour Famine, which inspired and nurtured an interest in mission. As a teenager, she had several experiences of short-term mission, travelling to developing countries in both Asia and Africa. Both her Undergraduate and Masters' studies qualified her in Community Development with the aim of serving overseas. She met her husband while they were both working for a large aid organisation and studying at university. The common link of a passion for mission found them looking into

opportunities to serve overseas after two years of marriage. Like Ana and her husband, Beth and her husband wanted to explore what it could be like to raise a family on the field. In the lead-up to going overseas, Beth expressed a real sense of God's guidance through several events and what she named "*closed doors*" on conflicting plans.

Charles began the mission journey out of a desire to serve within his training and expertise, which was an area of gifting that many people had pointed out to him and one that he enjoyed. When he was headhunted for a specific position in a developing nation, he was keen to go. Charles's wife had grown up on the mission field in this same country, so her familiarity and love of the country made the decision an easy one. "*I was happy to go along, because I was going back to where I was born, that was exciting to go back.*" The possibility of returning to the country of her early years and seeing her husband flourish made the decision to go very easy, "*we only took 30 seconds to say yes.*"

Eric was interested in mission from a young age and, while at university, visited his cousin on the field in an Asian country for two months, naming this time "*a wonderful experience.*" When he married, he found that his wife also shared an interest in mission, "*when we married, we just said we were happy to do what God wanted us, go where God wanted us.*" Eric had taken a year off from his work to attend Bible College, and it was at the end of this training he and his wife noticed an advertisement in a mission magazine asking for people from their profession to serve in a specific work in a developing nation. It was not a difficult decision for them to heed what he named "*the call*" and pack up their home and belongings to go to a missionary training college in another city.

Faith agreed with her husband Eric that when they married, "*we said to the Lord we're happy to go anywhere.*" Her interest in mission, was firstly fuelled by the church where she grew up, where a good friend of her mother was a missionary in a developing country. She followed with interest her mission journey throughout her growing up years.

Later her mother fuelled the fire by giving Faith a book by Isabel Khun, a missionary in China, which she loved. Faith's brother challenged her to support missionaries when she was at university, furthering her mission interest. After reading in a mission magazine about the specific need overseas, Faith and Eric approached the organisation and showed interest in the posting. They did so after consulting with close friends and family to check what they felt was a "call" from God to serve in this position and country.

So we talked first to our church and our family and friends and said we're thinking about this? Is this crazy and they all, nobody said yes it's crazy don't be ridiculous don't do it, it was all yeah okay.

Faith laughed as she recalled how, when she was studying for her undergraduate degree, prior to marriage her flatmate said that she often had dreams about being sent to Afghanistan as a missionary.

Each of these couples shared a Christian faith where the biblical precept of caring for neighbours, and the poor and needy, was deeply embedded in their understanding of what was meant by God's call to believers to "love one another" (John 13:34). This also encompassed a willingness to take risks, embrace uncertainty, and give up what would appear to be a comfortable Western lifestyle. Having agreement about the "call" from God, and their future was a common thread that was observable in all couples.

4.4.2 Hearing the Call

Grace had given no thought at all to becoming a missionary, as a close family member was already serving on the field and this, in her mind, fulfilled the family responsibility to send a missionary overseas. She was challenged when she received a prayer letter email from missionaries serving overseas identifying a need she could professionally fill, even though it was still six weeks before her graduation. On a whim, she replied to the email but was told

that she was “*too green*” and to come back and talk to them in “*a couple of years*” when she had had some professional experience. For some time, she put the whole idea out of her mind, but during a conference where the focus was on full-time vocational ministry, she revisited the idea. After a powerful dream and hearing God say to her, “*why don’t you trust me*” she decided “*ok, let’s do this thing.*” Once she had approached the mission organisation again, she was given a choice of seven different countries that were in need of her expertise. Until that time, she was completely unaware that her training would be so useful on the mission field. “*I thought you had to be a Bible teacher or a student to be a missionary.*” With the help of her mother, she chose one country to move to because it was the best fit for her skills and because her mother said, “*if you’re going to be a missionary, you might as well do it properly and pick the most dangerous place you can.*” Part of her thinking around her decision about where to go was borne out of pragmatism as she thought about the smaller group of people who would be willing to go to a dangerous country. It would seem that all participants gave little thought to leaving the safe confines of Australia to serve in what would be more generally seen as more dangerous countries in which to live. Maintaining the anonymity of these countries for ongoing security reasons prevents the researcher from providing a more detailed analysis of the participants’ responses around this detail.

Each participant expressed a sense of guidance from God as they considered the ‘call.’ This meant that each put aside their own safe and comfortable world in Australia for an uncertain future in another country that did not offer the safety and security that living in Australia does. It appears that the sense of being called by God was further enhanced by specific events which validated the path ahead. For Charles, an ‘*unheard*’ of situation arose which opened the door for him.

Yep, I’d been trying to get into (...) for a number of years before it actually happened, and in fact, I’d given up. 12 months before we got called, the vacancy had appeared

in (...) and had been filled by someone else, who had better qualifications than me, and it didn't work out. It's sort of unheard of for someone to come back after 12 months. And so a week before Christmas, ohh, we have a vacancy are you prepared to go?

This preparedness to go was also made easier as the family had already packed up all their belongings to move across the country to another position “*we literally had stuff in two towns.*” His wife, Deb, confirmed this by saying, “*I knew that he would just love to be a missionary ... and he was, he's a brilliant success at it. So it fitted in very nicely into what I could see him excelling in.*” Both Charles and Deb viewed these events as a ‘sign’ from God that the relocation to another country to take up the position was from God.

Eric spoke about a specific incident as “*that's what God used to actually get us moving.*” He had already taken a year off work to go to Bible College the previous year, which meant he was well prepared to serve, even though at the time the decision was made to go the Bible College, he had no specific direction in mind. Faith verified the sense that God was calling them by saying, “*there's a need and something stirred in us to get us moving.*” Again, both Eric and Faith saw those decisions they had made without knowing the future were part of God's direction and preparation to serve overseas.

Grace, however, had no intention of becoming a missionary and spoke about needing “*a lightning bolt from God,*” which eventually emerged to be God speaking to her in a dream.

I had a dream that I was in heaven with Jesus and we were looking at a photo album of my life and there was a page for each year and all the photos were all out of place and just sort of randomly placed in there, and when we got to page 50, that was the year that I started trusting Jesus and letting him direct my life, and all the photos fell into place and there was this deep sigh and the rest of the book just flowed, and Jesus

turned to me and said why did you wait until page 50, why didn't you trust me a bit earlier.

Beth shared the story of how all their plans for employment once finishing university fell through at the whim of a government decision

and that was just it so we lost our house and my job and our car and everything like that and that's when we were like well, you know, God obviously closed the door on that but this is the opportune time to go.

Because each participant felt 'called' by God to the mission field, certain assumptions emerged about how their time of training and service would unfold. For each, there was an unknown, which was approached with confidence because it was God who was preparing the way for them.

4.4.3 You don't just pack up and go

There was a significant time elapse from when the participants first heard a call to serve on the mission field to when they arrived on the field. This involved not just training for specific roles for some but choosing a sending organisation, as well as a training institution.

When asked how long the process of moving to the new country Deb answered, *"it takes six months... it takes a long time to get your work permit and support."* This included packing and saying goodbye to friends and family. Grace shared that when she first had a spark of interest in serving as a missionary, she approached an organisation but was told, *"this is really exciting, but you've newly graduated, you're new, you're green, you're no use to us, go get some experience for a couple of years and come back. So I did."* Even though Ana heard a call to mission when she was 16, she was married and a mother of two before they left Australia. The acquisition of a degree, coupled with Bible college training, meant

that it was many years before the call was fulfilled “*Yeah it took longer to get there, and we had small children by then so trying study and get an income and all of that sort of stuff was a bit of a challenge.*” Beth also knew that she was called to the mission field as “*a young girl,*” but it was after she met her husband that the move toward the dream became a reality.

We were kind of interested in similar work and we were both studying similar degrees and we just both knew that we always wanted to do that and so after, how long had we been married, maybe two years, must have been, we started looking into different opportunities.

4.4.4 Choosing a sending organisation

Having received such a specific call from God meant finding a way to get to their destination country, which involved aligning themselves with a sending organisation. Although the approach to selecting an organisation was varied, it was evident that there were many steps to be taken to achieve the goal of mission service. For Charles and Deb, there was no decision to be made as they worked with a denominationally based project, so when the need opened up within their denomination, there was no need to choose an organisation to send them.

Beth and her husband had a carefully thought-through and prepared plan for moving overseas to serve. Having identified the area of service, they looked for an organisation that aligned with their values.

Very much committed in looking to different sending agencies that had roles that particularly suited my skill set and so we just started looking around then and came across [organisation]...we just felt the values they had and their integrity as a mission organisation.

They had thought they would end up in India; however, this organisation was country-specific, which meant that the country they eventually moved to was not in their planning, although it was one that they had both visited previously. They were drawn to their sending organisation due to experiences at a mission conference.

I remember being at Reach Out conference and a lot of organisations that we spoke to, we would ask them what types of roles did you have available what are the needs, and a lot of them would say oh roles don't matter, what's important is that we get you into the country and we'll sort out a role for you after, and for us that was not what we wanted because we had, I'd just spend 5 years studying for, because I was passionate about community development and so, having that skill set we thought it would be a waste to go with a sending organisation and be placed as teachers or something where we don't have that skill set, so for us when we came across [organisation] and they were very much about no, we need people that can fill these roles, that for us was like yes, we can contribute to that.

Ana and her husband found that although some organisations they approached were happy to send them without Bible college training, they were aware that training would give them every opportunity to do well on the field.

We did go and do interviews with other organisations just in case and to see what was the right fit for us, and we still really felt like [organisation] was the right one, even though the others would say we can send you and you don't have to do Bible College, we still felt like it was the right thing to actually go with [organisation] even though they required us both to do a year's Bible College. That was a bit of a harder step because we'd have to sell our house to go to Bible College- and it was a harder thing to do.

4.4.5 Training

For the remaining participants, a time of training and waiting ensued to fulfill the call. Each participant shared different experiences of the training they received in preparation to be ready to move to a new country. For some participants that meant time in Bible college and missionary training colleges for up to a year. As they were aligned with larger sending organisations there was a clearly defined and organised pathway for them to follow. For some couples, that meant renting out or selling their home and moving into college. One couple shared that they enjoyed college because they trained with many like-minded people. In terms of the preparation they received, Ana shared, *“I thought that was really good, got us thinking about a lot of things that we really hadn’t thought through much prior yeah, I think that was good preparation yeah.”* During this preparation time, Ana and her husband had to deal with more external forces.

There were people who said, but you’re not bringing the children are you? And I’m thinking, well we’re going to [country] for 10 years, what do they think we’re going to do, leave them with the grandparents for 10 years?! Like what are they thinking?

Their experience was the opposite of that of Eric and Faith, whose friends and family were very supportive of their move. In order to attend college, they also rented out their house and moved in to live with friends close by. In essence, they lived in community sharing all things with their friends, which would have been sound preparation for living in an isolated community overseas. After Bible college, they moved interstate to a mission training college for half a year. Faith’s memory of this training was shared in this statement.

We covered various things, but more mission focussed and cross-cultural studies and some language and some personal and spiritual growth kind of stuff, quite a bit of reading, we could pursue some area that we were interested in.

Grace attended the same Bible college as Eric and Faith, albeit many years later. After Grace committed to missionary life, she participated in a six-month short-term placement.

So I went for six months, ... just to go and see, and what I really hoped would happen is I would go and not cope and then I could say see, I told you I wasn't suitable and then I could come home guilt free and stay in Australia.

On return to Australia, still unconvinced that missionary life was her call, she had news that a number of her recent team members were killed by insurgents. This was a pivotal moment for her in choosing her future path.

Underneath there was like this click, the final step in the process and I thought well, we've just lost x number of lives for Jesus, we can't afford to lose any more lives in the country and there is going to be a bunch of people who will be too afraid to go, that's it, I definitely have to go now. And that was the final moment of decision for me. So I finished off Bible College and went to [country].

While Beth and her husband had significant university training for their specific roles and had visited many mission projects overseas, there appeared to be no training for mission available in Australia before the time they had organised to leave the country. Their organisation of choice, while satisfying their desire to be employed within their professional training, did not offer mission training.

We decided to stop off in America and do a one-month training course there. So we went to [training college]. They just do mission training and language training as well.

Beth spoke of this month's training as "*brilliant...it was absolutely brilliant, we learned so much in that time and we were so thankful that we did it*".

All participants would agree that moving to a new country as a missionary required much time, planning, and sacrifice, although no one used the word sacrifice. They believed

they were going to serve God as He had asked them to and were willing to do what it took to get there. All had a sense that they were prepared for what would meet them on arrival; however, it would seem that none were really aware of just what that would be or how difficult it would be.

4.4.6 Finally here

First impressions of the new country were consistent across many participants. The difficulties encountered were expected, as all participants had travelled previously and were in some ways prepared for life in a developing nation. Firstly, there was the weather to contend with.

It was really overwhelming because it was monsoon time, so it was really hot and rainy, and you know we're homesick (Beth)

It was definitely hot (Charles)

The weather, the busyness of it all, the crazy traffic, so noisy, the pollution, the dirty streets (Ana)

It didn't get below 32 at night so it was really hot and there's no electricity for fans, so it was just so hot (Beth)

I don't think it was snowing when we first arrived, but there was snow around (Eric)

Hot and humid, I was used to the mountains, the pine trees, and the cooler weather.

Yeah, that was the main thing I think, just the heat, the weather (Faith)

Coping with learning the language and finding where to buy essential needs also posed a problem for all participants. Negotiating a new language without time to develop any proficiency led to some more interesting challenges. Eric shared

I got a lift with someone (to the capital) and I had to catch a bus back up and I was trying to find a bus, and I had very limited language at that stage, so I had got to the bus stand and there's just buses everywhere so I was asking people, [town name], bus, and people were saying, no, no, and I worked out the way people say it was [different pronunciation] so when someone finally said [town name] I said yes, yes. They said over there, you know, because they don't say the vowels, we would spell it [...] but it's actually [...], they don't have the vowels in between. So I learned how they say it that day, that was a learning lesson. (Eric)

Others had things to say about negotiating language difficulties.

We didn't know the language (Faith)

Yeah that's right, and my husband is far better at language than I am so it was just that tricky thing thinking, ahh, you put so little effort in, but you can only go so far and you think ooh, I put so much homework and practice into and I'm still chugging away. (Ana)

So I was with this truck driver, it was just me and the truck driver, he couldn't speak any English and I could speak only a few words of (...) and I'd got these instructions of where it was, and he had instructions of where it was, and they didn't match up so

he would keep on going. He was just trying to say, no, no no, it's got to be in this direction. (Eric)

The participants shared other feelings they had on arrival:

That sense of really feeling like a baby again and not knowing stuff, because you know I've lived in similar areas that I've grown up in and I just know where to go when I want to buy things and its efficient and it's whatever- just that feeling like a baby I think- you have to learn that all and yeah, I think that was the biggest adjustment. (Ana)

Yeah, because everything's so spread out, you can't get like, when we arrived we didn't have a bed, so we needed to go buy a mattress, and that's actually really hard, where do you get a mattress, where's the shops that get mattresses...and we were so uncomfortable. So we were really desperate for just, so can someone help us buy a mattress because we just want something to sleep on and even then you know the mattress are coconut fibres, they're not terribly comfortable, like they're just like not very comfortable... but just getting help, it was a fair distance to shops where you could go to buy a mattress, it's quite a big purchase, how ripped off are we going to get because we've got no idea what's a good price. (Beth)

Really uncomfortable beds and food changes and all of that and what's safe to eat and what's not, street foods safe to eat, where's it safe. (Beth)

Oh yeah, the house, I walked into it and burst into tears. I'm not living here. It had 6 inches of mould all over everything... even had locals who went and said we couldn't live in this house. (Deb)

The house that we lived in, well it was different to what we lived in Australia, it used to be an old cattle sort of shed, and they'd converted it but still the floors sort of sloped and there were huge gaps under the doors, and we had to put things against them to keep the cold out and that kind of stuff. (Eric)

One couple found themselves without assistance in finding somewhere to live.

For example when we were looking for a house we literally just walked around the neighbourhood that we wanted to find a house in and we had written down... our language team had given us phrases that we could ask, does anyone have a house to rent... ask local shop keepers. (Beth)

Utilities and services that are taken for granted in western countries provided a challenge in the new countries.

Yeah so it's seasonal, because it's just flow of the river electricity, so there's no coal power fire. There's no power stations. It's just hydro off the water as it comes through from the snowy mountains so nothing's banked. So the monsoon water comes, and once the snow melts then the water's coming again but. So then in winter we'd have four hours of electricity each day, so you can't even run a fridge really, no you really can't run a fridge. It only works for four hours a day. Best would be you might get 12 hours in a day of electricity, so we're in the capital and that's the best you can get, less in the village areas. (Ana)

There's no footpaths around, so you walk in the traffic, so you get hit on the elbow by the swing mirrors. Just yeah and I think the traffic it looks really chaotic and I remember at the beginning thinking I'll never get used to this, but you get really used to it and just having to brace yourself and walk straight into traffic to get across the road. At first I went oh my goodness I'm holding on to my children and thinking... but I got really bold and really, like it just took a while to get used to. (Ana)

Yeah that other thing with [country] is the geography of- it was to get from our central office to where our programs were being run it was like a 17-hour bus trip ... to get anywhere you had to add a couple of days to it and it wasn't nice travel. It was sitting on local buses because they were the only transport options. (Beth)

We had a wood stove, so that was good, so we'd all huddle around that. (Charles)

Faith shared a story about needing to select clothes that were in keeping with the women's dress code for the country *"I didn't feel particularly nice in them, but I felt under time pressure to get something."* Another participant shared the story of how some of her team members refused to wear the local dress, which caused them to be targeted and killed by insurgents while shopping. For one participant, personal safety was an issue.

I'm worried about the safety of my own children, the safety of things. I'd been to mission institute and discovered there was a rascal behind every tree and it's not true, but I was scared, that sense of it, it took me a while to realise it's not going to be like that. (Deb)

In retrospect, what participants were not prepared for was the cumulative effect of negotiating the discomforts of a new environment, as well as the impact of successive events that were out of their control.

4.4.7 In the right place

For all participants, the arrival in the new country, despite the difficulties, brought a sense of being in the right place.

they (the children) had fun playing on the hillside, making cubbies in the bushes with their friends and yeah, it was a great place for them to grow up. (Eric)

I have no real memories of culture shock, at all. I loved it from the get go, and you have the realisation of the hopes and dreams over years. (Charles)

Two of the long-term staff members from [site] were in (the capital) for the day, and they came around to see us and they were really happy to meet us, and said they were looking forward to having us on staff which was really nice, and they've since become yeah, like our closest friends from those years. Yeah, but then when we got to the [compound] I remember just feeling really welcomed right from the start, I remember the night we got there we were all sitting around somebody's table and just a feeling of 'we're here, this is nice these people seem nice, they seem to want us here. (Faith)

Yeah the local community, the [country] community, since that's yeah what we were there for, and we just absolutely loved the neighbourhood that we found our house in, we loved that our landlords, when we first moved in they needed to build a new little

kitchen for us, so our kitchen was out of action for the first month, and we ate every meal upstairs with them. They were like our [country] parents. (Beth)

We loved it over there and there was never a point where we thought we should pack up and go home now. (Beth)

I lived in a house of a lady who was on home assignment and so my house was completely set up for me all right from the start. (Grace)

4.4.8 Orientation

There were many different experiences of organisations amongst the new arrivals. Some had a lot of assistance from their organisation to settle into the new environment.

Certainly when it came to things like your general orientation, where is the supermarket, which market to go to, all those kind of things, there were other people there who'd already gone through it as ex-patriates who were able to give you help. (Charles)

The closest to other people in our organisation would have been a 20-minute walk away or something like that, so it's not like they were right next door. But still people were incredibly helpful.... first off, come with me and I'll show you where to go and how to do this- and then practicing a new language by going out and buying things at the shop and that sort of thing. So we were sort of shown what to do which was really helpful, so there was certainly a good amount of help I think. (Ana)

Grace felt well cared for by a long-term colleague when she first arrived. “*She was very gentle, very nurturing, but quite a bubbly outgoing character which I really enjoyed.*”

This colleague had been assigned by the field organisation to look after her. She met her in

Dubai and then flew together to the capital, where Grace was very unwell. *“she took care of me through that and she took me to [city] together and then she helped me set up my home there.”* She went on to say that the organisation was very supportive in the first months.

Faith had a positive organisation experience in that she was always invited to meetings where decisions were being made, even though her husband was the employee.

I remember thinking oh, it's nice to be involved in decisions and have afternoon tea with these people so. Yeah so it was just a community we loved being part of.

This contrasted with Beth's experience.

To an extent, so on paper, we were assigned a support. I can't remember exactly what they called it, the person who was responsible, a link person who would kind of help us to settle in and show us where to shop and, but I actually think, thinking back now, my link person might not have even been there when we first moved.

It didn't actually get easier when we first moved to [town] for a number of reasons. The guest house was probably a half an hour bike ride, straight up-hill bike ride to get to our language school every day. So it was monsoon season and it rained every day. So every day we'd get hot and wet and stinking and we did our language classes in the stinking hot and we'd have to go back and forth every day, so that was one factor. The lady who ran the guest house was a long termer, who wanted things done her way.

I think for us the most overwhelming part was just the lack of organisation in terms of you know, when we arrived and we didn't have much support in [the capital] and then arriving in [town] and having to do a lot of it ourselves and then after five months of language and orientation I was then going to transition into work, and I turned up on

my first day at the office and my line manager, who I was kind of sharing an office with, and who I was supposed to do everything with, basically said to me, 'who are you?'

Team dynamics were also a challenge on arrival for some, *"there were some interesting dynamics in that group, yes, which caused some friction, so that was a bit overwhelming as well."* (Beth)

Being totally shunned by her local office colleague was a continual challenge for Beth *"he never really warmed to me."* Deb spoke about ex-patriates on the compound, helping to orient them to where to shop, but when it came to cleaning the house of mould, she did it herself. As a former Missionary Kid (MK), she was very opposed to what she called a *"colonial"* attitude, so she was opposed to using local people to clean her house. She also reminisced that she was *"petrified"* because of what she was told before leaving Australia. *"I think what it did is it scared me, as I said they've got all these old missionaries come back and told everyone horror stories and it took the joy out of it. It didn't make me excited."*

4.5 Theme 2: The unimaginable happens

The participants in this study were purposefully selected as they had experiences on the field, which eventually meant they terminated their appointment. Having felt a direct call from God to be on the mission field, at the outset of service, optimism about the future reigned amongst them. The accommodation of discomforts and difficulties spoken of in the first theme were deeply challenged by events that they were neither prepared for nor expected, even though several had visited and or lived overseas previously.

4.5.1 Terrorist attacks/Political unrest

In her original brief short-term secondment to her serving country, Grace had been exposed to a significant traumatic event which was a precursor to what was to come when she returned as a permanent long-term posting. After completing her six-month posting, Grace returned to Australia with the challenge of what to do next.

So then I came home in [year] and people said don't make any rash decisions, let it settle about if you want to come back, and I was just letting it settle, and then about three months after I got back, 10 of my team-mates were killed, so it was like, six people from my team, a couple of local people and a couple of ring-ins from other organisation. They'd all been on this particular camp in the mountains and they were betrayed by a local colleague who shot them.

Grace recounted how the shock of this loss registered with her *“and I had all the typical shock reactions, I'm ticking them off a list in my head, I'm doing this oh look, this is a shock reaction.”* Interestingly this event was pivotal in Grace returning full-time to the field.

Several participants served in countries where political unrest and terrorism were the norm, so as a result, personal security issues had attention. All but two of the interviewees lived in a secure compound, which reflects the intensity of the prevailing safety issues. For one participant who lived in the local community, the sense of safety was disrupted during a season of political unrest, which culminated in riots in the capital. The family had booked flights back to Australia for furlough after two years of service, but there was no transport to the airport because of a strike. This meant walking the nine kilometres to the airport with two young children and all their luggage *“we got to a bridge where we had to go over a river- and the clash just in front of us- 2,000 people with sticks and rocks and everything.”* Their previous concept of being in a relatively safe country where they did not need to take extra precautions suddenly collapsed.

We just wanted to keep going and get on a plane. We had to get across this bridge and there was a whole row of protesters against the army. I can't believe that we were there. It happened in front of us so it's not like we planned and thought it was a safe thing to do. But I had a boy in each hand, (husband) was sort of behind a bit of way up, and I'm as just determined to get across this bridge and (son) looked at the army, one of the army soldiers, they had weapons and things on and (son) just said in (local language), thank you for letting us through. And he's six, and this army guy says, 'I'm so glad you've learnt (the local language), so many foreigners come and you don't learn the language', and then they all laugh, so the protesters and the army guys, my six year old has them laughing. So they let us through, across the bridge. So we went across. And I called (husband) and said quick, they are letting us through and they are laughing. Run. (Ana)

Eric and Faith lived in a relatively secure compound where they had the freedom to come and go as they liked. They spoke of their first thirteen years of service in terms of halcyon days, where the children enjoyed free play with other children in the forest. Eric shared, *"I think the longer we were there, the more we felt it was going to be really hard to leave this place."*

Faith shared that this idyllic setting was shattered on September 11 (9/11)⁴. Many foreigners, particularly missionaries working in Muslim countries were recalled at this time, including this family. Before this, they had had no thoughts of ever returning to Australia, and this event meant *"we came back to Australia not knowing if we'd be able to go back."* After some time back in Australia, it was deemed safe for them to return to what had become

⁴ 9/11, the targeting of the World Trade Centre in New York by Islamic extremists where almost three thousand people died.

their home country. On return, more provisions were put in place to ensure their safety, including restricted movement outside of the compound and building a high wall around the compound with armed guards at the gate. There was also a felt sense of safety as the compound had a military base beside it, which seemed to add a layer of protection from insurgents. At this time, all residents were trained in lock-down procedures, which Eric said they never expected to use as they were *“right next to an army education centre- there's a check post 10 metres away from our front- or 20 metres from our front gate.”* So, life returned to a new normal, *“so you know there's army all around us, no one's going to attack us. So, I don't know about others but certainly for myself I had no sense in which anyone would attack us.”* Eric shared that even when a Christian church was bombed in the capital, *“I didn't think we'd better be really careful now this could happen here.”*

Later it came as a complete surprise to Eric when the compound was attacked by insurgents. In keeping with the deidentification of countries and events as well as the participants, the following account will be abbreviated with identifying facts slightly rearranged.

I remember hearing these, what I found out later were gunshots, I wasn't sure what they were and I thought they were these things ...they're like big bungers and they make a huge noise and I thought ahh, some of those kids are on top of buses are throwing them out at people.... But what actually happened was the gunmen, when they came into the [compound] they killed a man who was at the gate just waiting... to see one of the staff members, then they shot the guard, so they came in the gate. There were four of them and they split up, two of them went one side of the church building and two went the other way.... So they were going to come out... Come in...blow themselves up on the court, the basketball court where everyone was sort of playing around, because that's where they'd seen the majority of our kids... They

actually had bombs strapped to them, so we found this out later. So anyway, these guys, I think we just think that they were kind of taken by surprise because everyone was inside and they were expecting to see kids, as soon as they come inside the gate they'd see the court but there was no one on the court.

After recounting a more detailed chain of events, Eric concluded by saying

I guess we just get reminded again of how God saved us. I mean six people were killed, and two of them were friends of ours who we knew closely but I guess in a way it just reminds me of God's saving power because there were angels that day who were pulling people into rooms and were pushing people to the ground, were throwing people over fences, were surrounding a lady who was caught out in the open and all she got was hit in her wrist and those, somehow or other she survived, there's no way with AK-47's they should have just mowed her down but she was somehow safe.

Faith's unpreparedness for any kind of attack was captured in her words.

When I heard the banging and I was thinking what's that noise, I guess it's maybe the transformer at the electric pole going bang again and then it happened that there were a few banging noises and yeah we just continued doing (what we were doing)... but I could see this panicked look on her face and she was kind of going... and I thought that was really weird why is she looking so petrified and I thought, I guess I was listening to the banging noises and thinking oh, it must be something bad... at that point I could see one terrorist coming up the steps and I remember he was all... he had a turban on and he had khaki kind of clothing... I think but I only just got a glimpse and I guess I saw his gun as well.

When Grace arrived back on the field for her permanent secondment, she recounted:

at this point we were under intense security problems. Our clinic has been held up at gunpoint. When there are multiple kidnapping threats, we're not allowed to walk at all in the city. I'm not allowed to go to the clinic to work, so we were under intense security threats.

Later two of her team members,

went to the bazaar, and they were in a taxi and someone came past on a motorbike and shot them. Two shots into the car and killed both of them. It was an assassination, there was like a mafia that was in control of the city at the time.

Ana also spoke of the time when she was in a taxi, “*and the bomb went off - and it was metres behind my taxi had just gone past, not two minutes... like 30 seconds earlier... and it blew up five people*”.

For Eric and Faith, the attack on the compound was why they returned to Australia.

For the remaining participants, the attacks were just one of multiple traumas.

4.5.2 Natural Disasters

Earthquakes and volcanoes featured in some narratives. Deb spoke about how they managed after a nearby volcanic eruption, which left them looking after many people with almost no water left. She shared that she thought their flexibility and creativity enabled them to manage this situation.

We took our 4WD down the river and we got drums of river water. We washed our hair and had a bath and washed the dogs and washed the car and had a water fight and bought the water back that was used in the washing machine then it was recycled for the toilet, and we made it a game... when we had 25 people living in a garage and 12 people living in a house after the volcano that's just what you do. (Deb)

Both Ana and Beth experienced a major earthquake and its subsequent aftershocks and damage. For Ana and her husband, the earthquake was the last in a series of events that saw them returning to Australia. Beth recounted how they had just become new parents when the earthquake hit.

I was by myself at home, sleeping on a mattress at the front door with my daughter and the aftershocks were just coming all through the day and night and I would just scoop her up and just run outside the house as fast as I can and the ground was just shaking all the time... Those first few weeks it was every 10 minutes, every half an hour. For weeks we had aftershocks... up until ... they are still having them now but the night we left ... we had a big one. But in those first few weeks there were big ones... and we just kind of survived that week, I don't even remember it, I don't think we slept either, it was just constantly running in and out of the house, and you know it was the same for all the ex-pats, it was just very stressful.

Ana and her family also experienced an earthquake.

Then the next thing that happened... we had an earthquake...so certainly walls were falling so people were... There was a lot of shaking... um...just that...has it stopped shaking or not?

For missionaries living in zones where natural disasters happen regularly, it becomes common practice to work alongside aid organisations in the immediate recovery process. “My husband then went two days after the earthquake happened. He went to the epicentre to do reporting because that was where they needed him.” Not only was Beth concerned about the safety of her daughter and herself, but she was also worried about her husband, who was not with them.

He basically spent the next week there, he actually didn't sleep, he was completely sleep deprived, I had bits and pieces of contact with him...I knew he was safe but he

was sleeping outside, he wasn't sleeping, he was doing interviews all through the day and night, so I was worried about him obviously.

This also meant the closure of the work they were involved in *“and basically everything in terms of all our programs and office, everything was put on hold and was earthquake related.”*

4.5.3 Cultural practices

Some cultural practices could be seen as traumatic in effect, which caused distress for some participants. Beth spoke of local attitudes towards her daughter, which were disturbing. Charles commented, *“One of the things in [country] is that the nationals will defer to you even if you don't want them to, and then they will resent you for making them defer to you.”* One participant, however, encountered some cultural practices as deeply upsetting. This was particularly around the dying and death of her local best friend after she had been misdiagnosed and wrongly medicated in a local hospital.

Then the extended family are concerned that we wanted to turn off life support because they thought we didn't want to pay the bills anymore at the hospital and they thought but she can breathe on the machine and she's alive so why would you turn it off if it means she can't, and we're like but we can't leave her on the machine forever, she's really distressed on it and she's asking to have it turned off. So that was really hard. They don't know how to do palliative care in [country] and we were asking doctors once we turn off the machine how long will it take, and can you help her to be comfortable? We don't want her to be given a large amount to actually cause her death, but we want her to be comfortable, can you manage this? But they didn't know how to do that. So we turned off the machine, I held her, her husband and her daughter. The three of us held her for an hour and a half. She writhed in absolute

distress, she was gasping for breath for an hour and half in complete distress until she finally gave up. It was quite distressing. It was a really distressing time. So, she was my closest friend, she died in my arms. (Ana)

The aftermath of this death was equally distressing for Ana,

we literally lifted her body from the hospital, into our car...into a coffin... everyone from our church gathered together... All straight away, within an hour of her death, we had her at our church in a coffin. There were strikes and we had to carry the body and stuff because we couldn't even put it in the car.

And so too, was the burial.

In the end everyone would wail. We all took a flower and put it on her and closed up the coffin and drove away and literally dig. That's another thing- I didn't go for the digging part. My husband found that really distressing. There was an issue with.... that's another thing in [country]. Christians want to bury, like Hindus don't want any burials because they would cremate and they don't want land used for burials, and so, they were given permission... there was a lot of ringing around... but they were given permission to go to this certain place to bury her and so the extended family and (husband) drove one of the vehicles to take her body out there and then this big group of Hindu's... it was at night time and they were digging and digging and digging... and it was really hard rocky ground... and this big group of Hindus came with clubs to come and beat them so that they couldn't do it and they were trapped on this bit of land with raging river on both sides and they couldn't get away... so they were just trapped and they wanted to bury (her friend) and that was really hard. (husband) came back really....

At this point, Ana paused for a long time to gather her composure, obviously distressed by the retelling of the story.

4.5.4 Health issues and accidents

For one family, the traumatic situations had not ended. After two years abroad, Ana was faced with a breast cancer scare that eventually turned out to be just that- a scare and nothing more.

I had an MRI and things and they were concerned that I had advanced breast cancer myself- and it was a five day wait for these results over a weekend- so I had biopsies and they didn't just take a couple- I had seven biopsies because they found this lump which was really big and they were really concerned and I thought I can't be having... I have breast cancer in my family, my grandma and both my aunts died of breast cancer, so I've got that in my family... so it was fine, and that was okay.

When the researcher commented about the number of major traumatic events experienced in a short time, Ana commented matter of factly, “*this is the start, there's another 10 to come after this.*” She continued to share story after story.

Then the next thing that happened was (husband) went on a trip to [mountain area] to raise money for the church planting ministry....he had gone there before and had gone higher before but with altitude sickness every time you do it...it changes every time.

But he ended up being quite unwell but telling the others to keep going. He had one porter stay with him and he deteriorated really quickly, because he had really quite acute altitude sickness. So he's had swelling on his brain and his lungs, so his breathing really was quite difficult, and he also couldn't make good decisions because of the build-up of fluid on the brain, so he was just not thinking straight either, and it really came on and deteriorated within a couple of hours. He was calling me on his mobile and saying I'm just getting down, we're going down, the porter and I are going down because I know that's the right thing to do, so they went

down to a certain point, but then they'd have to go up a bit before they could down the next one but then he couldn't make it, he couldn't keep walking any further.

With plans afoot to Medivac⁵ him out the following day, Ana and the children spent the night in one bed, trying to sleep and praying for him throughout the night. The Medivac proved successful, and he was transported to a hospital, where a doctor told Ana,

'I'm actually really surprised your husband's alive, he shouldn't have survived the night and what's going on right now is really serious and we've got it down, but it's really serious.' I thought I'd got him back, I thought I'd got him back.

This Medivac and serious illness were quickly followed by yet another incident where her husband hit his head on an overhanging rock and was badly concussed. However, as they were two days in from a three-day walk to an isolated village, he continued to walk, as there was no quick and easy way out. By the time he reached the village, he was so unwell that it was thought he had a brain bleed, so once again, a Medivac was organised. Added to his personal trauma was a village man who had sustained a compound fracture to his leg, which appeared to be gangrenous due to no access to treatment. The promise was made that the helicopter would airlift him out as well so he could access medical treatment.

There was no other way of getting him out, so that was the plan, the helicopter came, it was a lot smaller than expected as they only expected to pick up (husband) as a sitting person, they couldn't fit a stretchered man in, because he was on a stretcher- his leg was so busted he couldn't sit in a chair, and anyway, the helicopter, as they do, are like, I've come for you, you get in, and they were trying to get the stretcher guy in but couldn't, and the guy just closed the door and took off, and so (husband) is in the helicopter looking down at all these people who'd spent all this time sharing

⁵ Emergency Medical Evacuation by helicopter used in areas inaccessible by normal services

the gospel with and they've gone to open this school and then suddenly the ex-pat gets sick and gets helicoptered out and they leave the local man to die. So he just- he was devastated- he just said it was like a scene from Vietnam when they close the door and take off and people wailed, and you could see the faces of people screaming and wailing, why did you let the man go?

It seemed that accidents became a constant in this family. Their son, wanted to be like every other young person around him, and wanted to ride his bike.

So it was within two weeks of letting him start to cycle himself, he was cycling along, and a motorcycle was out of control and took him out. So, he rang us to say, 'mum, mum they've broken my leg, I've been smashed by a motorbike.' So we got there and basically he had a chunk.... but basically a chunk of flesh right there was out and so into his croc was the blood flowing, the blood was flowing out the crocs holes and the crocs, and it was just gross.

4.5.5 Relational Trauma

Three participants shared stories of difficult relationships with team members, which ultimately caused so much distress that returning to Australia became the only solution.

Earlier this year I read a published article on post-traumatic stress. I read it and went... now I know...now I know what's happening... and now I know...it was a revelation... There's something comforting about knowing what's happening, there's something comforting about not being alone...

Charles went on to talk about the effects of the lack of support, constant battle with leadership, sometimes over simple fixable things. He spoke about how destructive the lack of support was to himself and his wife, which found them isolated from ex-patriates in their mission community. The organisation's solution was to pay for them to have counselling,

which in Charles' words, "*We're paying for a friend until we find some of our own aren't we?*" Although mediation was an option provided for them, the mediator provided by the company was the perpetrator of the distress. The lack of a viable mediation process led to Charles indicating that he felt "*that the workplace environment has been abusive to Deb, abusive to Deb.*" Charles went on to say that he felt that the mediation process was "*designed to stop people suing the church.*"

Deb's comments echoed what Charles had to say as she spoke about the disillusionment of working for a Christian organisation. She recounted the story of taking aside the new staff member on-site and warning her that the mission was a business.

Its Christian by name but when it comes to money, people's Christian experience goes out the window, and it wasn't more than 2 weeks later from my office on the other side over the building I heard a staff member screaming at her, swearing at her because she wouldn't give them a loan, and she said to me later, 'you told me I'm running a business, you told me I'm running business,' I had already recognised not everybody has, or at a Christian workplace has Christian attitudes.

Deb spoke about how she expected something different from her co-workers.

and I expect more from the ex-patriates than I did from the locals, I can find an excuse for them but I cannot find an excuse for people that I think have had all the privileges in the world living in a place like Australia with all educational privileges and make us all treat people with disdain.... That's not acceptable, that's not acceptable to me, it's not acceptable to anybody. And I'm frustrated because I don't know how to change it, because I'm a change agent I want to improve... But I cannot change the place that's the most beloved, my place. This is my home and I can't change it.

Whereas once Deb felt her training and strengths were well utilised and valued, a new leader appeared to sideline her in ministries she previously carried out.

I'd been working for years... (leader) came back from holidays and said that's not your job, why not... because I told you so.

She had also been editing the organisation's local journal but was told there would be no longer a journal. When she asked why, again she was answered, "*because I told you so.*" In areas where she had previously worked, she found that she was blocked continually. "*I got to the stage where I can't do what I love to do, and I had no way of changing it.*" This, she said, was the catalyst for returning from the field. "*I feel as though he's a male chauvinist pig. I cannot handle it, if my husband spoke to me like that, he wouldn't be my husband, and I don't believe people should be treated like that.*"

Deb expressed this attitude toward her as soul-destroying.

But I still did not appreciate the fact that every time everything was done, my husband would be asked, and he'd have to ask me, and I'd have to get permission off him to do anything, and I'm thinking excuse me, that was just...So I just feel as though I'm no longer welcome and it's time to go.

Grace, too, was deeply affected by complex staff relationships. One of her colleagues found her presence on the team difficult. "*She said to me at one point, can you please be less good at your job so I don't feel bad about myself.*" Grace was a highly trained professional who learnt the local language quickly; however, her colleague had no professional training and expertise, and after many years on the field, she had not become proficient in the local language, nor was her English effective. "*I kept trying to find ways to make myself smaller to make room for, because she was working in a completely different field anyway, but I tried to speak in simple English.*" In ongoing conversations, she found that her colleague had "*also made a whole bunch of assumptions about me and my life because I was so well put*

together as a person she assumed that nothing bad had ever happened to me, so how could I possibly understand any suffering.” Grace shared that she *“was really committed that I was going to work very hard at this relationship with her.”* It, therefore, came as a shock to receive an email from the team leader *“we are requiring you to have a psychological assessment after the team conference because we think you are psychologically unstable and there’s a problem with you.”* This relational issue ultimately brought Grace back to Australia to seek a psychological report over the Australian Christmas break when no psychologists could be found.

The field organisation bought in a member care psychologist who assessed the situation and met with team members. Although the main antagonist was not present, it was eventually decided that the issue was a *“cross-cultural communication problem.”* With no concrete examples of where she might have been causing communication issues, Grace sought to reconcile the situation herself and found herself meeting with two team members one evening

We had our team meeting directly after our (...) I was being pretty quiet, because I’m just hurting that I’m still a problem, ...and the power went out and we’re sitting the 3 of us in the dark and my memory of that evening is that I said (team member) says there are still problems, we need to talk about what this is, and my memory is of mainly (team member) shouting at me telling me all the problems that there were with me just this litany of examples of things when I’ve done the wrong thing in the dark. Two women over me. Their memory of that evening is quite different, and obviously in trauma situations, memory goes, but my memory of that is of (...) yelling at me in the dark and (...) basically saying I back up everything (...) says. And eventually the power came back on and they were okay lets have dinner and I was like I think I need

to go home. And so then, after that evening, they wouldn't talk to me at all, even to do security check ins, so we are supposed to radio in every night to do security.

Following the refusal of team members to talk to her, Grace contacted the cross-cultural psychologist again, who recommended that she talk to the team members and “*sort it out.*”

So I said, look obviously there was a problem the other night, we need to talk this through, and [team member] said 'I have decided that I can no longer work with you, therefore, I am leaving [country] and going home and never coming back.'

As a result of this declaration, Grace pushed for a mediation process which ended up with another level of intervention.

They brought in a member care lady who was in [capital] who was on our team. She came and met with all of us and her response was they are all too tired, they have been under such security threats for too long. The problems in the team are a result of having a really bad security threat for a really long time and not looking after them.

This assessment resulted in the director requiring all team members to take compassionate leave and go home. However, the perception was that Grace was still the problem, so a psychological assessment was still mandated for her to return.

Because we think you're psychologically unstable, and I said, did you not hear what [psychologist] said, did you not hear what [member care] said? This is actually a team cross-communication problem. I think the others should have it as well, and they said no, we think you're the problem. Then I said the other problem was this is then the week before Christmas, I said everything is going to shut down in Australia, I can't get a psychological assessment in the next three weeks or even in the next six weeks because it's holidays in Australia and they didn't understand that, and they said no it's fine we don't believe you, its okay, the other girls could get one if they needed one and I said yes because they are in the northern hemisphere, and again

there's this closed loop of people who just weren't listening to me about practical things.

After the report was sent back to the field organisation, Grace was asked once again if she would be agreeable to a reconciliation process. However, the other party was not willing to participate. It was at this point that Grace discovered that a previous worker also had a similar issue with the same aggrieved party and ended up being sent home because of supposed psychological instability. The field organisation repeated the same actions, which resulted in Grace's sending organisation recalling her to Australia. During the time Grace was back in Australia, a new project was started with another team in a different city in the same country, which Grace was invited to join. The week before she was to leave Australia, "*we got the news that [colleague] who had come back from home assignment and [colleague] had been killed, so there had been 3 of them in town ...they went to the bazaar*" and were killed by assassins.

So that then meant that I got delayed a bit more, because obviously I couldn't go back straight away because [field organisation] was then in crisis mode and I was really grieving, really grieving [colleague] who had been such a rock to me, I had really, and I'm sure if she had been there that our team breakdown would not have happened and I wouldn't have been vilified in the same way because [colleague] was very calm, didn't jump to decisions, very, very steady and always very gracious to others.

In this study, three of the seven participants returned to Australia because of toxic team relationships, which interfered with team functioning and the mental health of those affected by the dysfunction.

4.5.6 Cumulative Stressors

Many single incident events have taken their toll on the missionary participants in this study but what is not so obvious is the prevalence of cumulative stressors, which also have an impact on functioning. Noted is the progression of difficult circumstances, which may not have been traumatic in themselves but nevertheless challenging to negotiate. These may have created the first levels of stress overload. For instance, Beth spoke of the challenge of getting used to the physical discomforts of a new environment and also the lack of welcome into the workplace where she was ignored daily. Ongoing transport difficulties and the arrival of a child into the family meant that when the earthquake hit, it seemed to be the 'straw that broke the camel's back'. For Ana and her family, no less than nine single incident, traumatic experiences were negotiated within the space of months.

Charles and Deb had experienced many years of relationship difficulties, leadership bullying, and frustrations in their workplace. Added to these factors were Deb's persistent health struggles. A very toxic work environment that went on for many months, coupled with constantly being on the watch for danger, led to Grace leaving the field for Australia. These participants were all very aware of the cumulative effects of daily living in stressful and or toxic environments, although, to the researcher's surprise, Ana had not recounted the traumatic experiences in a narrative prior to the interview, nor had she realized that they amounted to so many events. The fact that she had never counted them nor given attention to them as a whole demonstrates some amount of dissociation from them in order to cope. She described the feeling as follows:

So I think there's this feeling of being hyper-vigilant. We discussed how we felt at the time. It's like being at the beach when big sets come in, you go under, you get swirled around and you try to almost grab the sand to stay deep, you put your head up and you get the smallest of breaths before you go down again and you've got to do this,

and you get the smallest of breaths and then the next one comes, when's the next one coming because they've been coming in such rapid succession that we just felt like the smallest of breaths is all we can take.

The waves at the beach metaphor seemed to sum up the experience of most of the participants. Not being able to find a place to get a breath and take a break from the constancy of the difficulties experienced led to the eventual breakdown of the placements.

4.6 Theme 3: The Fallout

4.6.1 The emotional toll

Given the intensity of and the sheer number of often consecutive or simultaneous events, it is little wonder that participants began to encounter an emotional overload which for some led to mental health breakdown. Ana spoke of the beginning of her husband's panic attacks after the second Medivac.

Then the next trip that he took, he was driving a jeep out of the valley to go on a different trip, and he started having a panic attack, and he needed to stop, and he had a colleague with him and he said he can't drive any longer. And the other guy couldn't drive, and so they just stopped wherever they stopped, and he rang and said, I'm having a breakdown, I can't do anything.... he didn't feel safe any longer.

Beth described her husband when he returned from the earthquake epicenter:

He was like, in the worst mental state I'd ever seen him, and he hadn't slept all week, and he'd seen.... He would just lay in bed all night he was just sleep talking, giving radio interviews. He woke me up one night and said there's helicopter rubble in the bathroom because a helicopter went down and missing in the relief effort. So he was

really traumatized... he was really in a haze. I felt like it really took me a long time to really get my husband back.

Beth and her husband returned to Australia for three weeks after the earthquake to give themselves recovery time. Once back in Australia, Beth said that her husband kept having “*massive episodes.*” She was also having panic reactions, citing the time a smoke alarm went off in their house in Australia, which reminded her of the earthquake alert system in the service country. “*I picked up my daughter and I just started running outside, and I was like, how does this happen, we’re in Australia, there shouldn’t be an earthquake here.*”

In trying to process what was happening for him, Charles said, “*But you... this is... it’s... I’m unhappy and I don’t know why I’m unhappy, I don’t know what I want, I don’t know...*” When the researcher asked if he thought he was possibly depressed, Charles answered, “*Oh yes, there’s no almost, there’s no almost.*” He went on to say that he was mostly managing by being in “*denial.*” Charles’ pain and confusion were palpable in the interview, speaking slowly and repeating himself as if he was using the interview and the interviewer to process his present pain.

Deb spoke of her experiences on the field as a “*lonely*” place to be and said that the breakdown of the mission placement and the vitriol of the leader had caused a deep depression which led to a

nervous breakdown... I hit the wall. I don’t know what I said, but whatever it was, but whatever it was, was right....so I walked into the human resource office and said send me home...before I destroy somebody’s reputation or my own.

The organisation sent her back to Australia, on her own, to a retreat centre to recover. For Deb, the isolation further increased her depression.

I was on my own. I went up to the office every day, and no one spoke to me. No one said to me what were you in the office in November for? Not one single person. I had no one.... I got to the stage; I couldn't even catch a taxi to the airport.

Being sent back to Australia on her own with no support or help to recover further increased her despondency and anger with the organisation. She said that she “*just sat in my room and cried,*” which is what she also did on and off throughout the interview. Time had not healed.

As with Deb, the team breakdown and vitriol meant a loss of control for Grace:

Yeah, so I was very anxious... so I was spending a lot of time at the gym trying to get rid of that anxious energy. Yeah, and I would swing between lots of energy and utterly exhausted.

Interestingly Grace found the constant barrage from other team members, that she was psychologically unsound, began to impact her self-concept, which she felt previously had been quite strong. She shared that she began to try to alter her personality, so it became acceptable to others.

I've always considered myself to be an incredibly optimistic person, and I think I still am, but I'm far less optimistic than I have been. I second guess myself a lot more, I'm a lot more cautious, and maybe that's not a bad thing.... I'm far more likely to think that I am the problem than I was before. I still have that sense of I must have done the wrong thing... I do a lot more replaying conversations and thinking...yeah and I think when I get really passionate about something I do feel like, draw yourself back in Grace, people can't cope with that level of passion and excitement. So I think, I just sort of hold myself back a bit more than I would have.

When speaking of the death of friends in the attack on the compound, Eric broke down in the interview, taking some time to recompose. “*I haven't cried for a long time*

thinking about him," he shared. The intensity of the situations which had been endured still took an emotional toll.

In the context of the aftermath of the attack, Faith shared:

I was thinking... well just feeling unsafe. Thinking logically, it's unlikely this will happen again or that they'll come back or, but more just the automatic reaction of every time a door slammed, you'd jump. I would jump, everybody would, jump and think what was that, it was a door banging, every bang. We would be identifying what made that bang, oh, it's not a gun, it's such and such...

4.6.2 The physical impact

It was evident that those who had suffered physically were further affected on many levels by the impact of such events. It seemed Ana's family had a constant onslaught of physical issues, beginning with her brief encounter with possible breast cancer. The onslaught progressed from her husband's accidents, which included altitude sickness and serious concussion, to their eldest son's bike accident. The recount of the bike accident particularly highlighted the lack of medical understanding and application, as would be experienced in Australia, which transformed an accident into a significant traumatic experience.

They were scrubbing it with a brush, the way the (country)s deal with things....we took him to the best hospital too, trying to get him the best care, and scrubbing with the brush, and my goodness, and the poor kid was screaming, and my husband and I had to hold him down so it was pretty bad. Internal stitching, I didn't think there was enough flesh, but the internal ones were dissolving ones, but they weren't, and two months later, it popped the wound open again by them coming up, and he had three surgeries to try and correct this wound, so that was pretty tough... the third surgery we had to fly him back to Australia to the kids hospital because it was so infected that

the best hospital in [country] couldn't... in fact had created all that infection... and the pus was so...

Later in the interview, it was revealed that once back in Australia, her son experienced ongoing typical trauma reactions, the cause of which lay in the accident and how the wound had been dealt with.

Many physical symptoms accompanied Ana's husband's mental breakdown.

He lost 13kg in 4 weeks. He was just, and his heart was racing, and he was just all the time, and he was you know. He'd shut down from going, not shut down, but he knew, he kept saying I'm not well, I can't come to work. He called off trips and the was not going into the office as often or as long. So he was keeping a home base, he was pretty much half the day at home just because he wasn't well, and so he was hardly doing any, he used to walk to work 4km each time, and he wasn't doing a lot of exercise but he just burnt a lot of, lost a lot of weight.

The interviews revealed that participants were quite health-conscious and maintained a healthy diet and fitness programs while serving. Beth shared,

We were healthier than we'd ever been over there because we didn't have a car, and so we rode our bikes everywhere, we were actually training to compete in a triathlon... Anyway, so we were training for that, we would swim in the local lakes and ride our bikes everywhere and we'd go, like, my work was trekking to get to remote communities, so I'd spend sometimes just three weeks at a time just trekking... We were so fit, and diet over there is incredible, it's lentils and rice and vegetables... I actually never got sick at all while we were over there...we were actually really healthy, so I think that helped as well.

Deb spoke about using exercise to offset the emotional pain she was experiencing due to the stress from the constant workplace difficulties.

Well I exercise more than most people. When I realised I couldn't do more with my work I actually used that energy to go into health, so I was walking 25,000 steps a day... and I'm a nutritionist and I'm very much concerned about what we eat.

Her husband, Charles, also shared that they were both very healthy, although he said that having some kind of medical problem may have made it easier to tell people why they left the field.

Swimming daily became a way of life for Faith after the attacks. *"I really loved the pool. It was only like about 15 strokes from one end to the other."* She also shared that the acquisition of bikes in their new location helped keep up fitness levels. The whole family enjoyed the freedom that riding bought after being confined to the compound.

After the attack on the compound, Eric shared that he:

was just living and surviving, and that's what we needed to do... and I remember very distinctly the first two months in (...). I'd come back from work and crash, I'd just go to sleep and sometimes I'd sleep for two hours, and I'd just had it.

His body was telling him that he needed recovery time after the attack, and sleep was a healthy way for his nervous system to recalibrate.

Grace was younger than the other participants, so her answer about the toll the stress had taken was a surprise to the interviewer. *"I've done a lot to thinking about this actually. It's really aged me. I feel old. Yep ...I feel a sense of tiredness ..."*

She went on to share

Well I'm sick from being in [country]. I've got problems. So it's sort of hard to tell. So I've had global vitamin deficiencies because the quality of the food is so poor. Now I've got a parasite and something else going on in my GI tract that we don't know what it is, so I'm constantly tired and sick...and I just get more injuries now than I ever had before from working out. I've been working with a personal trainer and he

says I've lost all upper body strength, and we worked out I have a hunch from trying to make myself small because I'm so tall.

4.6.3 The spiritual impact

Significant crisis points, which included traumatic events, relocation, and the end of a dream, had different responses from the participants. Some found great solace in their faith, where others struggled to make connection to God and continue with their former faith practices. It was not the purpose of this research to trace why this would be so. For the researcher, in some participants, there appeared to be a cognitive dissonance around faith expressions

Whereas Ana, Faith, Grace, and Beth found their faith strengthened through crisis, Ana's husband had a serious faith crisis. *"So I'd say that he has pretty much given up on his faith since coming back."* Not knowing if this was a normal result of trauma was troubling Ana, and a conversation around this ensued in the interview. When speaking about her husband, she commented that he did not want to talk about not wanting to attend church,

he did not want to talk about the shutting down, and he did not want to think about all the energy to think through his doubts, he says it takes too much energy... I'm not in a place too where I've got the energy to deal with my doubts about God.

Charles' response was more akin to Ana's husband's faith crisis. He spoke about returning to Australia as an existential crisis, a *"huge theological and spiritual crisis...Am I really able to tell people to hold fast to the end, to be faithful to death.... it got too hard for us so we're leaving."* As he looked back, he wondered if he had achieved anything of significance on the field if he could walk away from it that easily. Although he was a full-time employee of the church, he was left pondering that he had *"probably become less engaged with the church in some ways."* Deb was very critical of the Christian organization

she was employed by, stating the *“the hypocrisy of it all is getting to me,”* to which she added, *“I don’t like going to church... because of the people who were at church.”*

4.6.4 Impact on the children

During the upheavals and relocation back to Australia, two families had children who were old enough to be impacted by the events the families went through. Both families spoke of how much their children loved being on the field, how easily they came to call their new country home, and how resistant they were to be leaving and returning to Australia. Ana spoke about how safe she originally felt with her children close to her workplace. They enjoyed companionship and fun after school playing ping pong and *“having a great time.”* They enjoyed the local lifestyle which included *“lots of great friendships with local friends outside of school hours so lots of visiting, lots of meals together.”* This enabled their son to become quite fluent in the local language as well as find a *“best friend.”* Eric spoke about their settlement in the new country as being an idyllic place for the children to grow up. *“It was a wonderful place to live because it had, you know, there's lots of space, there's community, so the kids could run around, we lived amongst trees in a forest basically.”* Faith added that the children had freedom they would never have had in Australia.

Consequently, the move from their beloved countries came with much angst for the young people. Emergency situations had seen both families leave the country temporarily prior to the final need to leave permanently. Over time both families experienced exposure to situations that would be disturbing for young people. Ana’s children encountered their first brush with a terrifying circumstance when attempting to get to the airport. Faced with a crowd of 2000 rioters who blocked their way with sticks and rocks, the family ran up and down little lanes, trying to avoid the angry crowd. She remarked that it *“was pretty scary, the*

boys were really shaking.” She then recounted the death of her local friend and what an impact the death had on the children

I think that it was really difficult because to them she was a second mother because she would play with them every afternoon after school and we would peel vegetables together, so she was very close to them so very hard for the boys, but you know, they helped lift her body.

And during the very long funeral service, she spoke of her eldest son negotiating the death of his second mother.

It was an open coffin, so he sat there next to her head and just stroked her face for an hour and a half at the funeral service. It was pretty beautiful really, it was really special, he just stroked her head for an hour and a half.

In just a short time from negotiating this death, her boys were confronted with the possible death of their father, who was suffering from serious altitude sickness on the mountain. In a phone call to their very unwell father Ana recalled the moments,

so the boys were saying ‘I love you dad’ and when we got off the phone (son) says to me ‘If dad dies, will we be like the beggar children. What will happen to us?’

In her husband’s absence, Ana and the boys were dealing with aftershocks from an earthquake, with one son forgetting the earthquake drill and rushing inside the house to hide under his bed to keep safe. Not surprisingly, children forget what to do in emergency situations. Shortly after these two events, her eldest son was involved in a bike accident where he was badly injured. This young man endured an overwhelming trauma load from the trauma of the accident and all the pain and attention it brought. There was obvious trauma from the subsequent treatment process, which included having the wound vigorously scrubbed with a brush, internal stitches that did not dissolve, and numerous infections, which led to three surgeries to resolve the damage, the last one being back in Australia. However, it

would seem that the most traumatic event for him was leaving the country for good, as this entailed leaving behind his best friend. Ana said that this friend was more like a brother to him, and they did everything together, including sleepovers, going to school together, and doing homework together. Despite thorough preparation to leave the country, using the advice from a local psychiatrist, he was totally resistant to leaving and dealt with it by ignoring the impending day.

Before we went to the airport... and our 12-year-old and his best friend held each other for - no kidding an hour and a half and wailed like women at a funeral. They wailed and they wouldn't let each other go. We had to pry them apart to put him in the jeep and his friend ran along the side of the jeep holding his hand until we actually had to stop the jeep and say you're going to fall under the jeep wheels. And he is on the back seat slumped into my lap and wailed like a baby the whole way to the airport, and he was really, I really truly think he was traumatised by saying goodbye to his best friend.

Consequently, Ana found that she had a suicidal 12-year-old once back in Australia.

Eric and Faith expressed that their children had a similar resistance to leaving, despite the intensity of the ordeals they had all been through. Again, consecutive events influenced their well-being as their idyllic lifestyle was at first impacted by worldwide and local targeted attacks on Christians, which Eric noted brought about “*a change in atmosphere.*” This meant the instigation of a lot more attention to safety for everyone. The children’s sense of safety was jeopardised by living in a country where Christians are regularly the target of insurgents. The bombing of local churches was quickly followed by the death of a much-loved community member, which again undermined their youthful innocence and sense of security. Paradoxically, after the attack on their compound Faith commented, “*our kids said don't take us back to Australia, that very afternoon.*” In the interview, Faith mentioned this no less than

four times, thus emphasising the plea of the children that they did not want to go back to Australia. Eric also said that one of the first things that happened after the attack on the compound was the children saying, “*don’t let us leave...we don’t want to leave... we don’t want to leave here.*” Once back home, the children struggled with further emotional disruption, which will be discussed later in this thesis.

4.6.5 Loss and grief

The sense of loss with accompanying grief permeated all interviews with the participants. Of all the emotions which may have arisen during the interviews, sadness was the most present and tangible. Not the least was the story of Ana’s son and the loss of his best friend when they permanently left the country.

He didn’t want to leave. And when we got back to Australia there was a lot of adjustments and things, but he was suicidal, he didn’t want to live... His whole world had ended. He’s like nobody likes me here, my best friend is back there, why would you have ever taken me away. I don’t want to live anymore.

Thus, she began the journey of finding help for her son and herself in how to help him negotiate this deep loss and the ensuing grief. Taking him to a counsellor ended in a confronting reaction.

He wouldn’t speak, he just went into the fetal position on her couch and he wouldn’t speak... and he’s saying he didn’t want to live anymore, and my very compliant self-disciplined boy at 9pm at night would just walk out the front door into the darkness and disappear. I had to go and find him. I’ve got a son that doesn’t want to live and he’s running away.

Ana expressed her loss of autonomy and agency when first arriving in the country, needing to be deeply dependent on others to help negotiate the new environment. “*Feeling*

like a baby all over again because you don't know where things are to buy and you can't just ask people in a language that comes quickly and easily." Beth also expressed this in her comments on her first impressions of the new country. *"What do we do, where do we buy milk, what do we eat, do we have to boil our milk?"* The lack of support for Beth and her husband in the first months added to the loss of autonomy and a confronting need for dependence on others.

The struggles to communicate added to their sense of loss, as the ability to communicate needs is a significant part of self-efficacy. Grace, too, noted that she had lost her confidence in herself. This sense of loss was shared by other participants as they negotiated the new country, facilities, language, workplaces, and customs, which brought about a loss of confidence in all. Faith shared that her normal confidence in how to run a household was shaken. *"Just working out how to work with a house helper, because we don't have that here, and because my language wasn't great, that's kind of the tension, thinking how do I say this?"*

Worthy of considerable note is the loss of significant people through death. Faith shared her reaction when she found out after the attack on their compound that there had been deaths, adding that she felt *"just this terrible sadness for them."* Eric began to weep as he recalled the loss of friends in the attack *"six people were killed, and two of them were friends of ours who we knew closely... I haven't cried for a long time"* he said. He also recounted the story of another death that happened just prior to the attack.

Their father died so he was drowned while saving 2 of their kids... their family was like one of these missionary generational missionary families, and he was just a lovely guy, and could speak all these languages, and had a wonderful ministry. So it was kind of like why... all of us were absolutely in tears.

Ana shared the story of the death of her best friend in her arms and the trauma around the experience of her dying and treatment in the hospital. The death of this friend also had a significant impact on her children. Grace grieved deeply the death of her colleagues in a bombing, a tangible loss as one had been a close friend *“I was really grieving, really grieving ... who had been such a rock to me.”* At the same time the other death had been her chief antagonist, who had caused her to be sent home. She shared that she was sad that she would never have the opportunity to restore the relationship with her. During this time, her organisation would not allow her to return to the service country, which brought about an added layer of grief. *“I was just in a total state and I just couldn’t get better in Australia because people kept asking me about it all the time.”* Both Eric and Faith spoke about the impact of not being able to go to the funeral of those who had been killed in the attack and their guilt that they had somehow let their local friends down.

After experiencing the violent deaths of loved ones and colleagues, there arose a loss of personal safety, with participants sharing their thoughts about their own mortality *“there’s that kind of thing, if I’d been there, I might have been dead as well”* and the recounting of thoughts about other possibilities *“we found out later they had actually planned, they’d been looking at us for two months, and they’d been casing us and they’d worked out the best time to come...normally I would have been outside right close to the front gate where they came in, but I wasn’t.”* Ana spoke of the impact of finding a lump in her breast and crying out to God, *“oh, lord not now”* as she thought through the family history of breast cancer. Further confronting personal mortality, she talked about when a bomb went off just behind her.

The loss of safety also included fears for family members. In thinking about where his daughter was during the attack, Eric shared, *“there’s this guy walks right past that open door, and she’d been kind of in view then she probably would have been shot,”* and reality sinks in. Beth spoke about how frightened she was for her daughter. *“The earthquake happened, and I*

just ripped her out of the highchair. I almost broke both of her legs and ran outside.” During the attack, Faith thought, “what are we going to find when this is all over, so in some sense I was thinking there would be an after time and I was thinking who’s going to be dead.”

Ana shared many stories about the loss of safety for herself and her family.

I just had to run up with each boy in the hand just run up these little lanes out of the way as these 2,000 people came with sticks and rocks at us, it looked like it was at us but it wasn’t at us they were just running. So that was pretty scary, the boys were really shaking.

She shared the near-death experiences of her husband and how she and the children braced themselves on two occasions to learn of his death. *“He sounded so bad, we didn’t know he’d make it through the night... we said good-bye to him on the phone, we said goodbye and we honestly didn’t know he would make it through the night.”* Shortly after almost losing her husband, her son also was involved in an accident which brought with it another level of fear around the safety of her children. This left her feeling *“hyper-vigilant, what’s the next thing coming at us? I think you feel like you’ve almost got your family around you, like what’s going to come at us next? Like what else can be thrown at us?”*

Beth experienced a sense of disenfranchisement and loss of professional competency once she started her new position. This was bolstered by the lack of professional support and collegiality emanating from her manager *“there was a lot of insecurity in terms of like the feeling of ex-pats not knowing, are we wanted, are we needed.”* Ana also spoke of the loss of her professional identity once she had to spend more of her time caring for her unwell husband, questioning her value to those who were supporting them on the field. *“and I now was hardly able to do much visiting and friendship ministry, then why is our whole family there, it’s not value for people support for us to stay here.”* Deb had a significant struggle with the lack of acknowledgement of her professional competency. *“I actually said to my*

husband, I've had enough, I can't handle this being ignored, I'd already had a Masters."

After gaining further degrees, the positions which gave her a sense of fulfillment, were systematically stripped from her by a new manager. *"So, I just feel as though I'm no longer welcome and it's time to go,"* she shared through tears. She sensed that she had lost herself in the whole process and she was of no value.

Grace found herself downplaying her professional acumen as it had become a threat to one of her colleagues. Because she had quickly gained a reasonable grasp of language and had former experience with the work, Grace said she *"jumped in with both feet"* with one other qualified colleague, getting programs up and running. A long-term team member found it difficult that Grace was able to achieve so much so quickly. As a result, Grace questioned her professional efficacy and demeanor and tried to minimize her ability in the eyes of their team members.

The mission field is often a place of much movement of personnel. Eric described it as, *"There was a lot of coming and going, um- yeah, lots of close families that our kids were really good friends with."* Grace expressed her sadness that two team members she enjoyed working with had left *"I quite got on very well with ... and ..., we were all living in the same compound... I'm really sad about losing them off the team."*

The sense of loss as participants relocated back to Australia or a different country was incalculable. The loss of relationships added another dimension that Eric expressed as sadness. *"I guess at different times there was... we just felt sad, and that was kind of as we were transitioning back to Australia... I mean we're still just processing the fact that we won't be going back."* Ana spoke of the loss of the dream she had since she was 16 and her sadness about not being able to fully live out the dream. She said, *"I'd go back in a weeks' time and I'd keep serving,"* which was no longer possible because of circumstances. Beth said, *"we really miss (country) because we loved it, and we just miss our life, and we miss*

our friends, and we miss the work.” Deb shared, “*So we’re leaving a world we love, because I love (country), I love what we were doing, so now it’s not comfortable anymore.*” She continued sharing her sadness “*We don’t belong anywhere anymore,*” as Australia was no longer their home either “*we’re going to a place that’s unknown.*” Eric shared about the loss of connection with good friends and how, over the years, reconnecting with some had helped resolve the sense of loss.

Overall, grief was palpable in all participants “*we definitely have been grieving... it’s like losing someone, you’re grieving that time and those relationships.*” The loss of significant relationships, which for most felt like family, was observable in all participants. One participant summed up the leaving for all. “*I didn’t want to leave like this.*” Charles’s mixed emotions about leaving ended with him saying, “*On a personal level, I would say that I think it would have been easy to keep us.*”

Eric echoed the feelings of loss expressed by other participants

I think there were just times where you just have a sad day, and I can't explain why I feel sad, but I just feel sad, and I think part of that was just the losses.

This was also part of Faith’s story as she expressed sadness for the nationals who were left behind when they moved and the losses they were experiencing. She also spoke about the grief she felt having to leave the country that had become their home.

So there was a mix of relief that we were somewhere else, even grief that we weren’t in (country) because that was where in theory, we all wanted to be, but yeah, we knew we couldn’t be at that time, we didn’t want to be there in a sense, just because it was all so different, we knew we needed to be somewhere else.

It seemed that much of the grief experienced, which was spoken of during the interviews, continued to be unresolved. The grief was tangible and sat heavily in the room with each participant.

4.6.6 The decision to leave

Making a decision to leave a mission appointment when there is a belief that the task was given by God is most difficult. Given that most participants had committed to staying in the country of service for indefinite lengths of time, the decision to leave was not made easily. Fraught with questions about how to negotiate this next step, each navigated it differently. For Eric and Faith, it was not a question of whether they should leave but of how and when they would do it, while taking into consideration the pleading from their children that they did not want to leave. They had also noted that when they had to leave the country years earlier, those colleagues whose sending organisations recalled them instantly and without inclusion in decision making, did not do well in the aftermath.

There were people who had been in missions saying you had to come back straight away, so within 24 hours they were leaving, and that was the worst thing for them. It was the worst thing, and they are the ones who have struggled the most in hindsight.

At the time of the attack, a visiting counsellor was on hand and advised that the group should stay together as much as possible. This was further reinforced by a team of counsellors who flew in from Europe just days after the attack. It stuck in Eric's mind that they were told, "*if there's any way that you guys can stay together,*" they should. Security experts from overseas embassies came on site and said that there would be only a small chance that another attack would happen. However, the country itself was becoming increasingly more dangerous, with nowhere safe to go inside its borders. This meant that a decision was made to move the remaining international cohort to a site that had become available in another country. Around one hundred people were relocated and set up, with buildings organised within 48 hours and the whole work up and running in a new country in six weeks. Both Eric and Faith spoke about how helpful the decision to leave as a whole

community was. To them, the way in which the relocation site was provided enabled them to believe that it was God's hand at work preparing a place for them to relocate to.

For Ana and her husband and children, the time came when her husband's mental health was so compromised that they both knew that they could not stay in the country. After nine separate traumatic experiences in a short time, his panic attacks increased, his work ceased, and he was immobilized. There was a growing awareness that they could not keep moving ahead with their work in the new country, and hypervigilance was emerging for Ana around the safety of the whole family. Acknowledging the need for help, Ana recalled that she thought, "*I don't know how to get help,*" which poses the question, 'how does someone who is supported by a large mission organisation not know how to get help when they need it?' After some searching, Ana sought assistance for her husband from an American psychiatrist who lived locally but was outside the mission community. There appeared to be some awareness that the local, and perhaps broader mission community, was not safe in some way, so she sought help outside of it. After the family's experiences of local medical training and practices, it was important to find a western trained professional, as well as a Christian. They wanted someone who would understand the importance of the 'call' to serve and not push them to go home immediately.

The psychiatrist helped them put together a plan for taking three months to withdraw from the country. This was assisted by knowing that both partners had put in place nationals whom they had trained up to do their jobs. In this process, they were committed to leaving well, making an informed decision about when and how to leave the field. Ana shared that they felt they had lost their value on the field, with her husband not being able to carry on and her need to care for him, which meant that she could not participate in what she could be doing ministry-wise. As she thought about those who sent them, a sense of responsibility for the work showed up. "*There would be other people ready and able to do this work, not us.*"

And I think that also, that we'd trained the local people to do the things that we'd done, which was brilliant... beautiful." This seemed to herald that their time was over, and they could decide to leave.

In the aftermath of the earthquake, all programs that Beth was working on were suspended. Her husband was still not doing well emotionally, so at first, the decision was to return to Australia for two weeks so he could recover, which would also give time for the tremors to settle down. Once they were back in Australia, the trauma reactions for both remained, so the leave was extended to three weeks. When they returned to the service country, they found *"everything had changed"* dramatically since the earthquake. All the areas of work had been shut down, as remote areas could not be accessed, and all the energy and focus of teams was going into earthquake relief and rebuilding. In order to stay, they would have had to shift gear totally into new relief programs. They discussed whether to *"go home to Australia at that point rather than stretch ourselves possibly again to breaking point"* when they realised that they had a baby to consider *"it was not just the two of us, we had a daughter as well that we were responsible for, or was it actually the wisest thing to just be realistic and leave."* After discussions with the organisation's pastoral carer, they decided to go home permanently. The director of their sending agency was personally involved and extremely supportive and did not force them to do something they would not be comfortable with.

For Grace, the decision to return home was made for her, as her field leader insisted she return for a psychological assessment. The field organisation was an aid organisation that was allowed into the country, unlike her sending organisation. The sending organisation had to work through the hierarchy of the aid organisation, which had little understanding of the situation, nor were they advocates for Grace. While in Australia, her teammates were killed in a targeted attack, which meant in the first instance, she was not allowed to return, and

subsequently, her sending organisation was hesitant for her to return, given the situation she was experiencing in the team. Grace recalled that her sending organisation was “*amazing*” throughout this process, but their hands were tied as they had to work through the field aid organisation. On her return to Australia, she completed some Bible college courses, finding college a pleasant, supportive place for recovery.

For Charles and Deb, the difficult decision to leave came after ten years of challenging relationships with leadership on the field. Deb shared she was “*not just putting up with it anymore and we’re coming home.*” At the beginning of the year, they gave an intention to leave at the end of the year, but the situation became so untenable they bought the leaving date forward to mid-year. Charles shared that it was with a heavy heart that this decision was made as he was leaving mid-year in a full-year program that would disadvantage others. The significant conflict with his wife’s manager, with no internal or external support, had worn them down to the point of resignation. Charles said he was “*getting older and tired*” which bought the decision forward. The organisation gave them a one-month furlough back in Australia so ostensibly, they “*could leave well*”. Charles said at this point he had no desire to go back to the country at all but at the same time, was also battling with not wanting to leave the country. The wearing down came from new leadership, which micromanaged him in a role he had been functioning in “*successfully*” for many years. He could have stayed himself under the micromanaging but could no longer stand coming home to a distressed wife who had yet another run-in with her manager. When the situation was escalated to a higher authority her boss’ actions were supported, “*oh no no, he had every right to do what he did and say what he said- and that happens consistently.*” There was no specific single issue, but they had been worn down “*by the pebble in the shoe.*” Things had been much the same for 20 years, but after 20 years they had less capacity to cope with the wearing down. Age was a factor here as he noted that as they have aged, they are “*20 years*

less capable of coping with it, and you've got 20 years' worth of frustrations." The straw that broke the camel's back was finding his wife in tears at work once again after the manager mocked her attempts to get an insect screen replaced in their home. This was something that they had been waiting for, for six months. *"The feeling was that anyone who was in a higher tier could treat anyone at a lower tier any way they liked, because I'm the boss, and you're the underling."*

Beth shared that they were worried that others would think they were taking the easy way out. *"I was just worried that it would look like. Oh, it was too tough, we're just going to pack and leave."* She faced a lot of guilt around the decision and felt like she was letting local friends and neighbours down.

Yep definitely, we had a lot of guilt around, like you know that's all well and good because we can just pack up and leave and go to our safe country but people in (country) are still sleeping in tents, you know, because, and even to this day they are...oh well it's great for us because we have our actual life back at home that we can just go back to and just slot in to, this was just like, you know something that you try out for a period of time.

The pull was difficult because they loved the country and the people so much and were the only ones leaving; all other ex-patriates were staying after the earthquake. Beth described this as *"survivor's guilt."* Deb also felt overly burdened by the thought of leaving the national community she shared life with. Comments such as *"you're leaving, you're running away and you're leaving us"* resonated deeply with her, and guilt about being unable to protect national staff added to her struggle.

For other participants, guilt about leaving was also voiced. Beth shared, *"I felt like I was ditching it early, I didn't feel like I was sticking it out like I should, so I think I feel a sense of abandoning the work early."* Deb added, *"They are implying that you protect us,*

and now we'll have no one, you can run away, we can't we're stuck here, and that's really added to my burden...It just reinforces the whole guilt."

Ana shared, *"I was really embarrassed and ashamed, like how do you explain to people what happened?"* For Deb, doubt emerged as well *"where are we going to land? We don't know because we haven't got a job. If we'd stayed another two years, financially we could have said we'll retire but we can't."* Ana wondered if they had made the right decision or if could it have all been resolved if they had just taken six months' leave. The theme of this conversation was peppered with self-doubt and wondering *'what if?...Have I done the right thing...my sense of doing the right thing is that going to backfire on me personally?'*

4.6.7 Back home

For Beth, leaving their host country to return home was very difficult, which led her to see a counsellor when they were first back to process some of her grief. This process was helped by understanding both the magnitude of the loss and the knowledge that God had a part in the planning and coming home. They believed that returning to Australia was at the right time, taking into consideration everything that had happened. In this whole process, God was very important in understanding and accepting what had happened. This possibly poses the question *'what would this journey have been like if they had not been able to find God in it?'*

Beth named *"reverse culture shock"* problematic in the first weeks of their return to Australia. Events and practices which were normal in Australia were culturally unheard of where she had been. At a family event, Beth shared, *"I spent most of the night sitting on the toilet crying,"* overwhelmed by what *"life in Australia is like...I think this is just how it's going to be now, and you never totally feel at home. You never feel totally comfortable."* The

dissonance between the two cultures was significant and felt. Ana, too, spoke of how difficult it was to settle back into a very busy western culture, saying it was

difficult to adjust, we always knew it would be, the reverse culture shock, and trying to work out how we fit in again, friendships that had all moved on... I found it really hard to let a friend take me to coffee for \$3, I just found \$3 such an excessive amount to let a friend pay for my coffee when \$3 could have been helping those malnourished kids, so it took me quite a while to turn off the exchange rate in my head and the stop feeling guilty for spending money here. That could help people there that need help, so I had to learn to stop doing that because it was making me churn too much inside.

After living in a very close, connected community, Ana found it difficult to return to the individualistic and isolating culture of suburban Australia.

I think it felt lonely, I think it felt lonely here in that we left a lot of community... you're often in their home for extended meals and time together, and you drop in on each other without organising weeks in advance.

The adjustment continued when Ana invited ten different families for a meal in their first year back home, and not one reciprocated the invitation. As was true for Beth, hospitality and sharing meals was an integral part of the culture they had left, so this was a very unsettling experience that made her long for their service country.

Is everyone else's dance card so full on the weekend with other friends there's no space for us on the dance card, and we were just like, no one likes us, are we really so freaky and terrible, there's something wrong with us...

The learning experience came when she shared how she was feeling with a friend.

To tell you the truth with dad working full time, mum working part-time, or full-time, we're doing the groceries, we're doing the laundry, we're totally stuffed, we love that

you invite us to a meal because we don't have to cook one, but we don't have the energy to invite you back.

Ana wished she had known this before she tumbled down the track of thinking, *“no one was my friend.”*

Disempowerment was a keyword Beth used as she spoke about being back in Australia. Her work overseas was all about empowerment, and the lead up to leaving the country was focused on the empowerment of others. However, once back in Australia, she felt very disempowered in the neighbourhood where she was now living. She felt very ill-equipped to deal with the social problems she could see there. Her whole life had been focused on the field, and now that she was back home, she was having difficulty finding purpose. The awareness that she had to renew a purpose was emerging and becoming something she realised she needed to do.

At the time of the interviews, Deb and Charles were in the process of returning to Australia, so this was a most difficult time of trying to position themselves for the future. Charles expressed this time as one of uncertainty, and like Beth, the sense of disempowerment also emerged as a thread in the conversation. As a couple, Charles and Deb had no idea what they would be returning to in Australia. Charles noted that he had been out of the country for three decades and living in a totally different culture, so he believed that assimilating into the Australian culture would be difficult. He thought his skills and training in a former role would be *“rusty.”* When thinking about the future, he shared, *“I'm tired, I'm not sure that I have the physical, mental, spiritual, emotional resources to do this at the moment.”* He mentioned that he would not be sure that he would employ himself if he was the employer, so perhaps he needed to take six months off and then re-train into another profession aligned with his skill base. Charles spoke of being in *“the ultra-classic abuse double bind, you can't stay, and you can't go.”* He expressed that he was currently

unravelling but using denial about his prospects to cope. So far, their experience of letting people know that they were returning to Australia had led to people offering their congratulations, which Charles thought was rather out of kilter with their reality.

Deb also spoke of not having a “*home*” community when they returned to Australia, having been overseas for thirty years. The dilemma of not being old enough to retire, and having lived on a meagre wage, meant they had to find work when they returned. Deb believed her skill base was significantly obsolete in a western country, so finding work would be a struggle. Although she was highly educated with several degrees, Deb had lived in a country that had not relied on technology. *“I don’t know if I’d have the skills to, I don’t know if I’d have the confidence to apply that to the Australian situation because of the technology.”* It was clear that the rapidly moving and expanding technological advances in the first world made it significantly difficult for anyone to catch up and acquire the necessary skills if they had worked in the developing world for a number of years.

Over a long timespan, Eric and Faith had several relocations from their country of service during difficult times. At the time of the interview, they had recently relocated back to Australia permanently. Both Eric and Faith spoke of God’s provision for them each time they needed to flee. In fact, what they would call miraculous provisions provided a source for processing the traumatic events, as they had many opportunities to retell the stories back in Australia. Connecting with other staff who had experienced the same events was a meaningful way to debrief and resolve the resultant trauma.

Faith found their relocation to another country difficult. A fellow missionary helping them settle into the new country said she had *“been in [country] for 15 years or something and she said I just love it here, and I remember thinking ‘why’?”* On arrival back to Australia, Faith was pleased to read a book written by a missionary, which said it took ten years to *“adjust to living in Australia.”*

I thought ten years okay. I won't have any big expectations of... I won't be in any big hurry- you should be okay by now- so that gave me permission to be a mess for ten years if I wanted to.

For Faith that meant practicing self-care, which was encouraged by other returned missionaries, some of whom shared that they did a lot of gardening when they first returned from the field.

Home was a safe place... I was just making home and the kids and Eric- all were going out to school and work, and so I just majored on, lots of gardening and lots of cooking and I kind of kept myself sane to look after them when they returned from their forays into the big bad world.

Ana told how her eldest son, Leo, negotiated the leaving process. The children were well-prepared over a three-month period for their repatriation, with direction from the local psychiatrist who had helped their father. After the very traumatic final day in [country] Leo did not want to live when he returned to Australia. Ana described what it was like to find herself with a suicidal 12-year-old.

His whole world had ended, he's like... nobody likes me here, my best friend is back there, why would you have ever taken me away. I don't want to live anymore. A 12-year-old suicidal, it's like... oh my goodness...my husband has been having panic attacks... And now Leo's saying he didn't want to live anymore, and my very compliant self-disciplined son at 9pm at night would just walk out the front door into the darkness and disappear. I had to go and find him... I've got a son that doesn't want to live and he's running away, which is so out of his personality type it's unbelievable.

Thus, began a journey of trying to find a counsellor in Australia who could help Leo.

I had taken him to a teenage counsellor thinking he needs help, I don't know what to do... I took him out to dessert on the way to youth group one time, I thought I'll just chat to him, I'll just check in, see how he's doing. So over dessert we sat next to each other, so we didn't look at each other and feel uncomfortable. I said tell me what happened when you got hit by the motorcycle. I thought it was more about the motorcycle than leaving his friend. And he talked about how he felt. Do you feel buzzy telling me that, how do you feel, and he said it's like it's raging inside of me...and I just went oh my goodness he needs help...and so then I tried to take him to a counsellor for teenagers, and he sat in the chair and went into the fetal position, and the counsellor said I've never had a teenager... he wouldn't speak, he just went into the fetal position on her couch and he wouldn't speak, and I thought I've made this worse, I've done the wrong thing, I didn't know what to do.

Ana's horror that she may have inadvertently made Leo's despair worse led her to speak with another counsellor at her church, who recommended that she see a counsellor herself to learn what she could do to help Leo, rather than taking him to therapy. This was a very helpful suggestion, which resulted in Ana having three counselling sessions where she learnt about how trauma manifests in a person and what to do to reduce the impact. Ana recalled that this was very successful in reducing Leo's fears and that taking on a coaching role with him took the pressure off him to recall what had happened, which risked further retraumatizing him. Ana wished she had known what she learnt with the counsellor earlier.

Eric spoke about one of their children, now an adult, who, at the time of the interview, continued to have nightmares about the attack. During the attack, she had seen a staff member covered in blood, bleeding from the injuries received in the attack. Likewise, Faith spoke about her children needing therapeutic assistance post-evacuation. After all four children emphatically expressed that they did not want to return to Australia, the inevitable

eventually happened. Leaving good friends was traumatic for their son, who had difficulty fitting in and making friends back in Australia. Likewise, her other children needed to negotiate varying levels of not belonging, which Faith noted was about not really belonging anywhere. *“But for our kids the lifeline was the Missionary Kids network, MK network.”* This group was a place where they felt fully understood and accepted.

4.7 Theme 4: Survival in the face of the overwhelming

4.7.1 Protective Factors

Extant literature informs the notion that those who negotiate traumatic circumstances and stressful times in a healthy manner have many prevailing protective factors at their disposal. These include resiliency, altruism, resourcefulness, family relationships, social supports, the ability to self-disclose, physical wellness, and spirituality. More generally the participants in this study demonstrated many of these factors as they recounted their experiences. Throughout the constant bombardment of traumatic events, Ana demonstrated extraordinary resilience, which appeared to be enabled by several protective factors. She laughed as she recounted her experiences of driving on the overcrowded and dangerous roads of the new country. *“I was driving again, totally fine with driving, not concerned about the driving at all, happy to pull out in front of anyone and everyone and I just knew it all”* this demonstrates her resourcefulness and optimism, which are both characteristics of protective factors. Her adaptability and problem-solving ability are shown in her capacity to adopt roles not previously experienced and problem-solve on behalf of the family during numerous troubled times. Furthermore, she told of significant social supports. *“We had lots of great friendships with local friends outside of school hours, so lots of visiting, lots of meals together, and those sorts of things as well.”* Supportive friends in times of need enabled Ana to negotiate challenging situations.

I'm so glad that my friend who's a doctor said, 'can I come with you to the airport to meet the helicopter' and I said, 'oh no I'll be fine' ... security wouldn't even let me in, so I was so glad that my friend came because you know, we just sat and we prayed, then she just got really bullyish, and she just bullied our way straight in.

Beth spoke about the support from her parents and close friends that enabled her to move to a faraway country and manage the complexities of many difficult circumstances.

I basically said to my mum one day before we left, 'well you've only got yourself to blame because you raised me to follow God and His will for my life and this is what I'm doing, so it's your fault really that I'm heading up into the mission field' - but no we couldn't have done it without their support, both [husband's] parents and my parents, and siblings and close friends and church were amazing support.

The protective factors provided by her extensive support system gave her the freedom to venture from home as well as develop resiliency which enabled them to manage the difficulties encountered there.

I'm very close to my sisters and mum and dad...my mum and dad visited us in [country] so they had a very good picture of what our lives were like over there and that was really important to us that our parents came and visited and understood that.

Of significance was the support given by their sending organisation once they were back in Australia, which enabled them to settle back in as well as they possibly could.

So we very much feel supported, ongoing support from them even though we don't have ongoing involvement...and you know he's always asking how we're doing financially, if we're okay, and things like that, he very much cares for us as people.

Both Faith and Eric also had significant support from family and friends throughout their mission service and once back home. Both had family members and friends who actively encouraged mission service and provided an ongoing support network of prayer,

financial, and physical support. *“We also had a little community thing going on with them and another family where we shared finances for a few years.”* The cohesive community in which they lived overseas also provided significant social support, which offered a buffer from the horror of the attacks they experienced *“we felt supported by family and friends and church.”* Faith spoke of the experience she had with two friends whom she said *“loved her to death... their warmth and love melted some of the ice and self-protection around me.”* Coupled with unlimited support from their sending agency, both Faith and Eric were able to process many traumatic moments when on the field and remain strong and resilient in the face of terror.

Grace was sent by the same organisation as Faith and Eric, and she too experienced the immeasurable support of the organisation throughout very tough times. Coupled with the support of her parents, Grace was able to remain resilient despite unending personal attacks while on the field, *“[organisation] have been fantastic throughout this whole process.”* When the organisation was hesitant to send her back to the field after the death of her colleagues, Grace said her father

wrote this seven point essay for [the organisation] which concluded in, ‘given all of the above, the opportunities that Grace has to share the gospel, her willingness to go, the need of the [country] people, the safety structures that are in [city], not only do I think [organisation] should send Grace back to [country] I’d be disappointed in them if they failed to do so.’

It was Grace’s mother who also encouraged her to choose the most dangerous country to serve in. The support Grace found from both of her parents as well as her sister, who was also serving on the field in another country, coupled with the support of her sending agency, formed in her a resilience that enabled her to return to the country despite opposition from the team with whom she worked.

4.7.1.1 Resilience

It is clear that all participants faced overwhelming circumstances, but what became apparent was an inordinate amount of determination, courage, and resilience in the face of such adversity. This was most demonstrated in the story of Ana and her family, who encountered an avalanche of difficulties in a short period of time. Nevertheless, they stayed on the field despite the constant barrage of events until her husband's health deteriorated to the point that was deleterious to their work and to himself. Ana appeared to manage by putting the needs of others in front of her own, with the short space between each event not giving her time to recalibrate her nervous system. The matter-of-fact way in which Ana spoke of her husband's second Medivac indicates her strength and stability *"Yeah, so again, I'm meeting a helicopter, I kept laughing I've got Medivac helicopters on speed dial... I know how to get through security now I've done this before."* When speaking of going to the airport to pay the helicopter bill, she casually told of a bomb going off behind the cab she was in. *"It blew up five people, so that was just so I could pay the helicopter bill for my husband who had just survived."* And then a casual *"but the hard stuff was hard... well it did get better."* When asked about how she managed after the traumatic death of her best friend, Ana answered, *"I think, yeah we sucked it up."* When speaking of her husband's first Medivac Ana shared that night with her children, *"I just really needed to be real about it and so, we did, we just slept in the big bed together and just woke and prayed and slept together and woke and prayed and things like that."* Ana was asked how the constant barrage affected her well-being. *"I just stayed strong and well,"* she replied, again reinforcing that when there are many protective factors in place, it is possible to maintain wellness and, therefore, resilience.

Charles and Deb had remained in conflict with leadership for many years, with Charles sharing that *"I do have a letter on my computer to the then (director) written 10 years ago saying we're going home, 15 years is enough."* What kept them in an unworkable system

for so long? Again, throughout the interview, Deb told of many incidents which displayed her resilience. This included arriving in a new country to an entirely unsuitable house to live in, managing the results of a volcano in the lives of the people around them, several abusive situations, and a general lack of support throughout their years of service. Deb adopted many forms of self-care to cope with these situations. These included walking and crocheting.

When my work started to be devalued, I went and took up crochet and I've crocheted blouses and dresses and anything you could creatively think of. As my counsellor said you've probably got crochet coming out the door. I said yes and down the steps. So I tend to transfer my energies into other things like exercise but I feel... I feel...unfulfilled.

Deb spoke about developing what she called “*selfish*” activities to help cope and her struggle with feeling selfish. However, “*you feel as though you are achieving something, so I'm now in the middle of doing tapestries and long stitches for our families up there to give them all a present as we leave.*”

After the worldwide horror at the 9/11 attack and being called back home, Eric and Faith were keen to go back to their service country. In fact, they and their children did not want to leave in the first place. Resilience is seen in the number of times they left the country because of political unrest and then, with little hesitation, return as soon as they could. Busyness seemed to be a common thread in helping participants to cope after particularly violent incidents. “*There was busyness, had to get our life organised*”; “*there's lots of things to organise*”.

Children, it would seem, are particularly resilient. After the attack on their compound, Faith and Eric's children begged not to leave. “*The kids are saying don't take us back to Australia.*” Despite such a long series of traumatic events, including the possible death of his father and his own injury, Ana's son “*absolutely did not want to leave.*” Leo had sustained

significant trauma in the local medical system but was able to look past that and remain in the country with his best friend. In retrospect, all participants demonstrated a level of strength and resilience, which enabled them to cope with circumstances that were very much out of their control.

4.7.1.2 Trusting God

Encountering difficult circumstances is often the place where trust in God is either increased or moved to a secondary place in a person's life. During her time on the field, Faith was introduced to a more contemplative style of prayer and connecting with God, which became an enormous help when facing the very traumatic season that ended in upheaval. Faith used journaling in the form of a conversation with God as a coping method. *"I was very thankful for my journaling"* which to her reassured her, *"and oh God yes, of course you're with us."* She spoke of her avid reading and underlining of the Bible *"particular phrases that stood out to me for one reason or another, that just God used to encourage me, or inspire me."* Eric said, *"I think we had lots of opportunities to talk about it,"* which he said helped to process what had happened. Like Faith, Eric also shared that he felt that God had been active in caring for them. *"But it's also a triumphant story because we just saw God saving, it's just crazy how we were saved on that day."* His theological understanding of events seemed to enable a sense of God's protection for his family throughout their ordeals.

He brings us out of a bad situation, and so we've experienced other bad situations, and then we, I guess we've learned, God's going to use this in some way, when I say bad, I mean bad in inverted commas, things we interpret as bad, well they might be hard things that we wouldn't really want but God brings good out of that and we've found that time and time again that he brings good out of a hard situation, not only does he strengthen our faith, but he brings good out of it.

Music came as a source of comfort and connection to God for Grace.

I felt like how I felt nourished and connected to God was through singing and playing worship songs on the piano, and I felt like it was a gift of God, and I felt like I'd never been able to do this before, and I'd tried on previous occasions and it'd never worked, but all of a sudden God just gave it to me, it was like really amazing and then it was all through music that I really felt nourished during that time.

Discovering a music CD that brought great comfort reinforced to her that God cared for her in the tough times.

Yeah, so I just had that on repeat, just the CD on repeat all the time, so I think that was really mainly what was happening for me. I spent a lot of time bouncing off those songs in prayer, so just sort of having that sense of I can come to Jesus and just relax at this moment, and I think I was too sad and too muddled to pray or to really do anything correctly.

Beth had a lot to say about her faith journey while overseas. *"It was a time where you still had to really make a big effort, like, to learn and grow."* Although there was little spiritual input locally, Beth's faith grounding held her in good stead during times of uncertainty. *"you're just forced so much more to cling to God."* She shared,

I still grew a lot because I had to kind of do it for myself, I had to be the one pursuing God and not just letting the church speak to me and the Bible studies speak to me, I actually had to actively pursue my relationship with God...because of the difficulty of being taken to breaking point so many times, it just gave you a complete reliance on God and just a recognition of alright, God you're in control... it was like that with the earthquake, and it was like that every time we hopped on a bus, and you know you'd be driving along these rocky mountain roads, and there'd be a bus down in the ravine

that had fallen down in there yesterday, and everybody on board had died, and you just think, well what's to say that isn't our bus, you know. Every day you kind of take your life into your own hands when you get on to the small little airplanes, and go up into the small remote areas, and then you hear one crashed on that same route and you just, you know, it just gives you a new understanding of trusting God and putting your life in his hands, so in that way, I feel like I grew a lot spiritually.

This time in a foreign country put Beth's faith to the test, and she found God present and sustaining. Learning to walk with God day-by-day in the difficult times facilitated a stronger relationship with God.

I think you know we had this overwhelming sense of this is where God wants us in this season and we're secure in that and we're just going to keep working here and you know God just kept opening doors for us and showing us the way forward.

This implies that a solid foundation in a relationship with God holds one in good stead when things are tough. However, the understanding of the guidance of God is challenged when circumstances radically change the situation a person feels called to. Grace spoke about how much she thought about "what happens when it doesn't turn out the way you want." Putting her struggle with God into words, Grace shared,

what happens when, do you blame God, and we just had a such a strong sense that this was part of the brokenness of the world, you blame Satan for this stuff, this is satan's act there not God's act, and I thought through a lot of that when I really struggled at this.

Similarly, Ana found that she was reduced to trusting God in a very simple unspoken way to sustain the family. She began to pray short prayers because the urgency around the health of the family put God out of focus.

It's like bunkering down to help the family get better, I think that I also bunker down... just my relationship with God, it got, shorter prayers, still reliant on him but I don't know, I was sort of too, I didn't have as much energy for reading my Bible, praying, that type of thing, I was in survival mode really.

Ana went on to say that she did not feel like God had abandoned her family and that being a Christian did not mean that things would be easy for them. A poignant addition to her discussion at this point was about her eldest son.

I don't think that we blame God in any of the hard stuff. I remember asking ... my eldest, you know how's your relationship with God, and you know after leaving your friend, and your foot and all that sort of stuff, and he just said, that's just part of serving God in another country mum, like he really said that, and I said, you're 13, that's maturity.

There is no doubt that for several participants, their faith in God supported them during the events that overwhelmed them. Learning new faith disciplines, as well as embracing tried and tested faith practices became the cornerstone of their survival.

4.7.2 Sources of help

All participants experienced helpful levels of either pastoral support or counselling provided by their organisations. For both Charles and Deb, the significant help they had come in the form of counselling they had back in Australia during times of leave. Likewise, Grace also found that the counselling sessions provided by her organisation helped to resolve her self-doubt and embarrassment around being sent home. She was particularly aware of the prayer support coming from back home, which helped her maintain her focus. She was also assigned a pastoral friend who was an enormous support at the time. Her organisation encouraged all staff to have a supportive mentor outside of the organization; one who had

mission experience and understood the peculiarities of overseas service. The strength of this kind of relationship relied on both common experience and confidentiality, meaning that what was shared did not go back to the sending organisation. Beth also had a pastoral care person, who was a counsellor, who journeyed with them through the difficult stages of their placement. *“She was great”* added Beth. During the decision-making time around returning to Australia,

we had Skype sessions with her, and she was continuing to support us and that was really helpful. She was very, very understanding and very encouraging of us to make the decision that we felt was the right choice.

During the overwhelming time overseas, Ana sought help from a local Western-trained psychiatrist who was of invaluable help not only to her husband but also to the whole family.

She was brilliant, she was really, really brilliant. I can't believe I had access to this lady... so she was brilliant, and just because he was having so many panic attacks, just giving him some medication, like the relief was just amazing to see him go from you know, and she explained that his body was just so wound up he was spinning into panic and panic attack. One day he had seven panic attacks, she was really so helpful.

Again, Ana sought help for her son and then herself from counsellors back home. Likewise, Eric and Faith's children sought help from counsellors and missionary peers once they were back in Australia.

At the time of the attack on their compound, Faith and Eric had the assistance of an Australian counsellor who had been visiting the team around another matter. A team of counsellors from Europe also arrived within days of the incident, taking the entire team through a helpful debrief and decision-making process. Once back in Australia, they found talking to other team members who had been through the same experiences extremely

helpful. *“It was just a really special time and we heard things that we hadn't heard from her perspective and she heard things from our perspective that she hadn't heard.”* They were also assigned a pastoral care person once back in Australia. *“She will keep checking, sort of four months down the track, how we are travelling.”* One helpful provision for the family was the gift of a beach holiday in Thailand when they had first evacuated from the site. *“We didn't have to do anything,”* recounted Eric *“an anonymous person paid for the staff to go away during the holiday time just to have a time at a resort.”* It would seem in the aftermath of the attack, Eric and Faith had many supportive and encouraging phone calls and visits from representatives of their sending organisation.

I still remember him coming, and I think that was very important, so all the time we just felt very much supported... I think they did everything that, I mean we needed, I mean they just said, whatever you need to get yourself set up just tell us and we can help with the finance ...well we were setting up in a new country kind of thing.

When Beth's husband arrived back from the earthquake epicenter, she was confronted by how unwell he was. She sought help by calling an ex-pat doctor.

So what I did I called one of the ex-pats who was a doctor, a GP, and I said can he get him some sleeping tablets because he wasn't sleeping, and she said I'm not just going to give you sleeping tablets but I will come up and assess him and talk to him, and that was better than what I was hoping, so they came up and in the end gave him sleeping tablets.

While her husband was still at the earthquake site, help for Beth came in the form of local girls. *“Yeah, the girls that lived nearby, they came- and someone would sleep at my house with me because I did not feel confident sleeping by myself.”*

When speaking of her sending organisation, Grace emphatically shared,

I don't know anyone else who does anything like they do, so when I came home they were very keen on prioritising me as a person, so they said, do you still want to work, do you still want to be a missionary, do you still want to be in [country], do you still want to work with [field organisation], all of those were up for grabs. Because you are more important to us than anything else, which is brilliant.

4.7.3 When help did not come

Although some participants shared stories of their overwhelming support from different sources, others were considerably let down. Deb and her husband were very disappointed in the lack of support from their sending organisation. They said they had been careful not to speak to others about the dysfunction of the leadership, *“we were also very careful in what we said to them we didn't want to reinforce that negativity.”* There had been conversations with local staff about the unsuitability of a leader who had a *“problem with women”* and did not relate well to people in general. Deb questioned the appointment of leaders who appeared to have few leadership skills and questionable people skills. In thirty plus years of service, she had learnt not to trust this organisation.

Charles reiterated the broken organisational system where there was no one to advocate for them. He sensed that it would not have made any difference to the situation. *“Who do you talk to... who would you trust?”* Charles said that if you spoke to someone, you would find out that the person you were talking about was their cousin or such. Organisationally there appeared to be nowhere to go for help as the site in the country they were working in had some amount of autonomy. Even if people in Sydney knew of the difficulties, they expected the issues to be solved at the country level. A mediation process could be actioned, although cynically, he thought that was to prevent the organisation from *“being sued.”* Charles told the story of a couple who left the field the previous year under

similar circumstances to their own, where a mediation process had taken place. The process had not achieved helpful outcomes for the couple, as the designated mediator was the authority person who was the problem. Charles commented, *“To me it’s fundamental, the system as it is in place is skewed against us.”*

Similarly, Grace’s placement seemed to break down because of the mismanagement of the leadership in the aid team on the field. Despite bringing in three different independent assessors, the organisation, highly influenced by their fellow country people, chose to believe that Grace was causing all the problems in the team. She said she was unprepared for not having a voice and felt like the *“sane person in a psychiatric facility.”* Because no one would believe her that she was ok, she began to yell louder and her *“shrill”* voice in trying to say she was fine proved otherwise to the audience. So in the end, she felt that *“I ended up looking like I was crazy.”*

Ana expressed her uncertainty about what their organisation may have done if they had kept them more informed about the issues they were encountering.

Looking back, I think, if I had a sense of what they might have done with us and for us, rather than just being fearful that they would have required us to go home, we could have worked more with them. But I think we purposely kept them out of the loop, we kept it from them because of our fear of what they would need us to do. My husband was really concerned that if we sought help from our sending organisation directly, he was concerned we’d be forced to go home, because he was unsure, and I think it was a more, I don’t think he, you can’t see the bigger picture, you’re not thinking terribly straight, you’re very, I’ve just got to keep it together and things like that. So he didn’t want to share at all, and he was concerned with whoever it might be shared with what would be the repercussions.

In this instance, the repercussion was that they would be sent home against their will, which they did not want to happen.

4.8 Theme 5: Preventing Attrition

4.8.1 Pre-service training

Although there was pre-service training available for most participants in this study, the specific interest of the researcher was the availability of training in trauma-informed practices to mediate the results of traumatic experiences and therefore prevent attrition. One sending organisation offered specialised training to a participant as she was going to a high-risk area. However, she felt her professional training meant that she was well-equipped to manage the difficulties of the placement. It is not known what that course may have entailed, but it is pleasing to note that it has been a consideration for one sending organisation. During pre-service training, some participants recalled participating in simulations.

Certainly, in the training they say you know that natural disasters will happen...they simulate being kidnapped and they do talk about that you should be submissive and do what they say and don't make yourself a problem because you might get eliminated. (Ana)

Yeah, just different things like that that just prepared us well, we even did a few simulations, like we did one like terrorist attack simulation, a few things like that... we didn't do any natural disaster simulations, but yeah that was good because after the simulation we'd obviously have a debrief, that was the most important part. So, they gave me a bunch of resources to read in that area, I didn't feel like I needed a lot of those resources but I felt like I had a lot of it already. And then yeah but no, we didn't look at a lot, I was the only person in my cohort that was going to a high

security location, but they talked about it with me did I need more than that, they talked about going to a security program, you have to go through security training you'd be kidnapped. (Faith)

One training program provided what was named as PFA. However, the ensuing discussion showed the training had little resemblance to common PFA courses.

Psychological first aid sort of stuff...they talked to us a lot about living in another culture means that you just are always functioning at only about 70% of what you would function at in your home cultures, because you're dealing with all of the stresses of living in another culture you don't have all the resources to deal with all the other problems that are gonna come up so when something goes wrong in your family or your relationships you can feel that more strongly because you're living overseas you've got less sort of resources in your emotional bank to deal with it. So yes, they prepared us all for that sort of thing, but not so much for the specifics of trauma and high security. (Beth)

Overall, the interviews made it clear that participants had scant preparation for what was to come.

In general, participants spoke positively about parts of their training that were helpful once on the field. Beth praised their invaluable training in America, which helped them negotiate marriage stresses encountered once in a different country. She also mentioned the helpfulness of understanding some of the more nuanced issues when working cross-culturally.

There were lots of just lessons like that that really helped us in the everyday where we just had to stop for a moment and go, no I need to exit my own world and I need to enter the world of this culture and really try to understand what's going on behind that, so for example my relationship with my boss, when I just looked at that and I

thought, I need to try and enter his culture and understand the hierarchy and the male dominance and you know, I can't look at him and just think, you're a chauvinist and think but this is the culture that he's been brought up in, he's been brought up to think that men should work and women should be at home, and I can't blame him for that. It's just the way it is, so things like that.

Another part of their training that was helpful was self-care.

I think in our training as well, they taught us about like self-care, you know, understanding our limits, like I remember one of the best things that they said to us was even on your very best day, your capacity in that new country, like, your best capacity will probably only be 70% of what your 100% would be back in Australia, like you're never going to reach 100% capacity because you're always going to be on the back foot in a way.

The interviews included a probe question about whether the participants had experienced any training in what to do in traumatic situations prior to leaving Australia. This questioning also explored whether participants had been prepared for possible emotional/psychological responses post experiencing a traumatic event. From the responses recorded, it is clear that apart from one participant who had undergraduate and post-graduate degrees in mental health, there was little preparation for what was to come.

4.8.2 What was needed

During the interviews, participants were also asked, *“In hindsight, what would you have needed before, during and after your placement so that you might have been able to remain on the field?”* They were also asked what they would like to say to sending organisations concerning their decision to leave the field.

Ana shared

I was worried for (husband). Because when you're unsure, because I didn't understand trauma, because I didn't understand, I just wanted him to be better, but I didn't know the path for which he could, was he going to get better, can I be of help, what's a possible path for him getting better, I think it's the not knowing, that was the issue. But if someone could have explained a bit more about trauma...

When talking about the professional help she received back home, Ana said, *"I just felt so much more empowered if I'd know that then."* When speaking of the decision to come home, Ana shared, *"I didn't have the information, and out of that we decided to close the door definitely to come back, whereas if we had known more about trauma and that you will get better, these are the things that can be helpful."*

Of note are Ana's comments about not knowing whom to talk to in the organisation once her husband began to display signs of distress. *"I don't know how to get help but if I ask for help, maybe they'll make us go home."* Having had some experience of the relational style of personnel back home, they were concerned *"they don't get it, that might have required us to come back... right stop working we've got to pull them out... ."* Ana wished she had known what the organisation's process was when someone was not coping. Had she known what the process was and that they would not lose the power to make decisions, it may have been possible for them to speak to the organisation much earlier than they did and gain the support they needed.

Ana spoke about what they had been through being common knowledge among the organisation's leadership, both in Australia and in the host country, and wondered why they were not more proactive in checking on them and helping them. When speaking of the field leader, she commented *"that she was aware of what we'd gone through. So she was aware and come with us and prayed with us regularly, so she was totally aware of things."*

It would appear that prayer was the only form of support offered to this family, which caused Ana to wonder why they had not been more proactive in helping.

I wonder whether it would be good that the leadership in countries are more aware of trauma themselves and start to look out for it... if they could be themselves better informed to say...this is like the sixth thing they have been through, I need to check in on them, and I need to make sure they understand more about trauma, and what we can do to help them. If they could be more proactive as people on the ground...

Beth, too, echoed Ana's comments about what was needed while on the field. She answered, *"definitely, pastoral care support, because we didn't have that for most of the time, definitely like leadership basically, leadership within the ex-pat community... we just didn't have that."* This appeared to be an issue in both small and some larger sending organisations.

Beth also spoke about the lack of psychological resources after a natural disaster *"I think he (husband) spoke to someone over the phone or skype, but it was nowhere near what it should be."*

Again, there was no one leading, really leading the ex-pats at the time. When it first happened (the earthquake) there was someone who rode their bike around the check that everyone was safe and checked their name off the list, very physical but not in terms of emotional.

Once her husband was back home, Beth was aware that he was not well and called in the ex-pat doctor, who prescribed him sleeping pills. She spoke of how this one doctor *"was kind of trying to support the whole team who were all having their own troubles at the time."* With both aid workers and missionaries thrown into the pool of those trying to help locals through the disaster, there were few, if any, people on the ground who could support those who were psychologically suffering.

Beth also spoke about the need for appropriate debriefing once back in Australia.

It would have been really great to have debriefing with someone who was actually specifically trained in missions debriefing. You know, the guy that we saw up here was great but he wasn't... so it was more just helping us to process it.

Charles spoke of the need for a reconciliation process, a mediator to help people through an abusive workplace. He expressed that this needed to be an external person, similar to an ombudsman, to go to. He wondered if regular external debriefing would help isolate problems and have them dealt with so they did not accumulate. He felt that the leaders would be protecting the organisation above the individual, so in-house conflict resolution, as was provided for them, would never be beneficial. He felt *“It all boils down to money at the end of the day.”* His closing comments were, *“I think it would have been easy to keep us... Yep, and in the end if we'd got the feeling that our concerns did matter, we would probably still be there.”*

In order to resolve the conflict in Grace's team, a mediator was brought in; however, their recommendations were not adopted by the field organisation. *“So I would say, first of all I would say they need to listen to their experts.”* She believed that there was a *“closed loop of people who just weren't listening to me about practical things.”* Grace felt unprepared for the lack of psychological understanding on the field, where professional assessments were ignored in favour of country affiliations. In retrospect, she felt she needed an advocate on the field who would have given her a voice.

I needed an advocate for me, and I just never had that. I needed someone who they would listen to and who understood and I never had that. I don't know how I could have gotten that, the cross-cultural psychologist who I was talking to offered to do that but she wasn't a Christian and she just was on a different planet with those

issues. When I was talking about reconciliation, she was like cut them loose, why would you go back to these people?

Grace's comments are similar to the comments of other participants who wanted intervention from Christian mental health specialists, as it seemed that when secular counsellors and advisors were brought in, there was a lack of understanding of the Christian principles at stake in the teams they were working in. Not having a forum in which to tell her side of the story was a source of frustration for Grace. *"I had never had an opportunity to defend myself either, so they never gave me... never said what's your side of the story."* When Grace returned to the field in a different location, she found that the previous team member who had caused her so much angst was also responsible for similar team breakdowns in the past, resulting in the return of other team members. Although that was common knowledge amongst serving missionaries, she wished organisationally this history had been addressed.

Understanding the more nuanced impact of cultural differences in the team would have been of value to Grace. Given that cultural communication styles seemed to be central to some of the team breakdown, Grace thought that investigating and understanding the more nuanced culture within the team might have been helpful. The focus had been on understanding the culture of the nationals in the country she was serving in, but the real problem was around a dominant team culture that was almost opposite to Australian cultural norms. This was also echoed by Beth, who, while knowing that the difficulties she had in her workplace were the result of cultural understandings, it seemed that her sending organisation did not realise that a young Western female working in such a culture was never really going to work.

Deb wished her sending organisation had recognised her as a professional, an expert in her field. She struggled with being discounted by male leadership and having to go through

her husband in order to have a voice. *“I want someone to come to my house and I want someone to recognise me or both of us and what we’ve done and do something to make us feel we are valued.”* Deb was pleased when the new general secretary of the organisation was appointed as she knew him from childhood so she had invited him to make contact. However, her thankfulness dissipated when he visited the country.

They have a meeting, we all have a big basket tea afterwards so the council members can meet staff and so they can debrief, he doesn’t even come to that. He sits up in his office and does his emails. So I know that we’re not important.

She believed that even though the organisation knew there were problems, there was no process in place to resolve them, and they did not know how to manage them and so did nothing at the cost of losing valuable staff.

Despite many negative comments from participants about organisations, Eric was very positive about their sending organisation, both at the time of relocation and once back home in Australia. Interestingly, this is the same organisation that Grace spoke so highly of.

I just think they’ve got a lot of bases covered in preparing us and there’s opportunities for, I mean every time we come back there’s debriefing, and there’s a couple of debriefing sessions...and if we want more, we can do that, and so there’s, you now like a pastoral care person, she’s already been out here, and she’ll be coming out next week as well.

Unlike Deb and Charles’ experience, Eric said, *“I think it’s helpful so that they understand our situation and we can say it in our own words, because I think that we’ve had the opportunity to talk it through with a number of people.”*

Faith wished her sending organisation had given more time to spiritual formation in the training period. She would have liked

more emphasis on so how are you pursuing God, how are you doing in your relationship with God, what might this look like and just a bit like what I was mentioning earlier about different stages of Christian life, faith, what it might look like in different ways, normalising...I don't feel like there was a lot of that but to do that kind of thing you've got to have people who see that as important and who are gifted in encouraging that in people and drawing that out of people and I guess the staff at the time that wasn't their main strength... so what about you and God and your times with God and focussing on God and seeking God, what shape does that take, how are you doing that, how are you going with that, how can you grow that?

Having found how restorative spiritual retreats were on the field, she thought that the provision of such retreats should be incorporated regularly into life on the field.

Ana also wished she had more training in '*spiritual warfare*' as friends had warned her that once they started in a specific work, they would be a target. "*I was just a bit sceptical, things would happen if you get into this, well it sort of really did.*"

It is apparent that the participants had mixed experiences with their sending organisations. While some found them to be thoroughly supportive and involved at every level of need, others ranged from wishing there had been more field support to damning reports of neglect and internal strife.

4.9 Summary

This chapter contains the participants' recount of their lived experience with the view to making sense of why they returned from the mission field earlier than expected. The findings presented arose from the data analysis of the participant interviews. Six super-ordinate themes were identified along with a number of resultant sub-ordinate themes which came to light during analysis. The descriptions provided by the participants give insight into

their journey to the mission field, their experiences on the field, and the process of returning to Australia with a focus on the impact of their experiences. The exploration of the meanings of those experiences and what can be learnt in hindsight form the discussion in Chapter Five.

Chapter 5: Discussion of findings

5.1 Introduction

This chapter draws together all the threads of this study, which has utilised a phenomenological approach to understanding the lived experience of missionaries who returned from the field earlier than expected due to traumatic experiences. The research was conducted keeping in mind research questions that explored the types of traumatic events experienced by missionaries, the effects of those experiences, and what helped negotiate the aftermath of the events. The final question aimed to identify what may have assisted participants in remaining on the mission field rather than returning to Australia, which was not in their future plans. In a recapitulation of the research questions, the chapter summarises the key findings of the research as reported in the previous chapter. It discusses the interpretation of the findings in the context of previous research, which was presented in Chapter 2. In the tradition of IPA, Chapter 4 recounts the participants' understanding of their experiences, while Chapter 5 seeks to add the researcher's understanding of their lived experience through careful reflection and analysis. As a result, the interpretative dimension of the double hermeneutic of IPA is engaged (Smith et al., 2009).

The overarching theme emerging from this study was that the commitment to serve God in an overseas missional capacity had been influenced by early immersion in the church and a distinct call from God to service. This call ended for all participants because of circumstances seemingly outside much of their control, as well as events that impacted the mental health of themselves or family members in a way they were not prepared (Vanhuys, 2019).

Emanating from the broad research question, which asked if some missionaries return from the field earlier than expected because of traumatic experiences, five super-ordinate themes emerged:

1. The call that begins the journey toward a mission placement overseas
2. The unimaginable happens: the type of overwhelming events experienced during field placements
3. The fallout: The effects of the overwhelming events on general functioning, psychological and spiritual adjustment, including the decision to leave the mission placement and the ensuing impact
4. Survival in the face of the overwhelming events: resilience and sources of assistance
5. What was needed to prevent leaving the placement: What was learnt and what could be changed.

5.2 The importance of the call

The question may be asked, ‘Why would missionary service be seen as a viable career choice for some people given the sacrifices which need to be made, as well as the difficulties experienced living in another culture?’ A key finding which emerged during this research was the power of what is known as the call from God to serve in another country which has been well validated in the literature (Carden, 2017; Howell, 2009; Kreminski, 2015; Stamoolis, 2002). For some, this call emerged at a young age within a church context. All participants had an interest in mission ignited as a result of early encounters with missionaries, confirming the significance of early exposure to mission as suggested by Sibanda (2016). This exposure suggests the possibility of service within the mission field and also informs specific choices for further training and education once schooling is completed. In this study, all participants were university graduates; some were purposeful in their choice

of degrees, choosing educational programs which would contribute to specific needs in developing countries (O'Donnell & O'Donnell, 2013; Robert, 2009). Other participants found that their university training was well suited to the needs of such countries. All responded to a particular need because their training was needed in the specific locality (Hay et al., 2007). Not only were participants influenced by early experiences in church, but some also sought out and married partners with the same sense of call on their lives.

It would seem that there was little doubt in the minds of the participants as to the validity of their perceived call. Both Ana and Eric introduced the word 'call' into the conversation without any prompting; however, it seemed that there was no definition for what a 'call' is. Two participants spoke of seeking the input of others as a way of confirming their sense of call and their desire to serve on the field. Stamoolis (2002) asserts that confirmation from others is necessary for the resilience necessary for longevity on the field. However, most participants did not mention this kind of confirmation. Some used the alignment of circumstances as a 'sign' from God to confirm their commitment to serving God on the mission field; however, it was possible in their zeal to be on the mission field they missed other 'signs' that were of equal importance but contradictory.

The call to go, however, was influenced by other means. Most participants were deeply influenced by short-term mission experiences or the emotive stories they heard from missionaries when there were young. The power of the stories heard at an impressionable age often made the field seem like an exciting place to be, where God's active intervention was seen regularly. Fowler's (1995) stages of faith development may inform the power of this influence when a person is in a 'synthetic- conventional' stage of their faith development. At this stage, one is more able to think abstractly and see things from another's point of view, but the world is quite predictable. The stories told by serving missionaries would not provide any indication of the longer-term effects of difficulties in communication, ongoing climate

challenges, team formation and maintenance of relationships under compromised leadership capacity, and the impact of cumulative stress and trauma.

Ana used the word 'love' many times in describing her early excitement about mission service, and Faith spoke of her 'love' for stories from the mission field during her younger years. Deb knew her husband would 'love' the role of a missionary. Perhaps this emotional experience masked addressing some of the more practical aspects of service that could have been addressed prior to leaving Australia. Beth and her husband were a good case in point. Their urgency to leave for foreign shores was prompted by the loss of employment and an income and the lining up of circumstances that were seen as God's call to go. However, in their urgency to leave, they forwent the sending organisation's suggestion of pre-service training and left Australia with no training for longer term placement at all. They spent one month in America, where they learnt some helpful strategies for surviving on the field, but it would seem they were ill-prepared for what they would encounter. Grace, again, was the exception where she called her decision to go a "pragmatic, mathematical decision." However, she was the only participant who had a felt sense of God directly speaking to her, as Hay et al. (2007) noted as being significant in their research.

All participants would name themselves as Christian in their faith expression and were raised in the church from a very young age. This is consistent with Sibanda's (2016) finding that missionaries are formed in their local faith community, where the local church promotes the notion that serving God is a viable career option (Hay et al., 2007; Nel & Scholtz, 2015). While some family members were highly supportive of the commitment to mission work, others were not so supportive, believing that personal safety, security, proximity to grandchildren, and earning capacity were of higher importance. This caused some amount of alienation, fraught with a lack of understanding from some family members and friends. Interestingly this did not cause doubt in the minds of the participants but perhaps

further fuelled the desire to serve and to find a new support group of like-minded people which some did when studying at bible college. It was evident, however, that each participant had support from at least one significant family member who encouraged them to go and who supported them when other family members tried to convince them to stay in Australia. Some participants were children of parents who were currently, or had been, in full-time ministry, again validating the missional call of the adult children (Stamoolis, 2002). It was also clear that having a sense of a call from God enabled people to take risks, go against current societal norms and expectations, and embrace uncertainty while all along understanding the various costs of such a commitment and embracing them unreservedly (Stephens, 2018). It could also be contended that having a specific call from God prompts people to stay in circumstances that bring unrelenting distress to the point of emotional and psychological breakdown, as found in van Vuuren's (2017) research, as well as in some participants in this study as expressed by Deb "*I basically had a nervous breakdown.*"

It became clear that some participants seemed to stay on the field despite deteriorating mental health and untenable circumstances because of the inability to resolve the tension between the belief that God meant them to be on their mission placement and had called them to their country of service and the evidence that the calling was no longer tenable. As a result, for some, there appeared to be a certain inflexibility that undermined the decision-making process preventing them from taking action when they needed to, thus further complicating and entrenching psychological distress. Flexibility was a word used by both Grace and Charles, with Grace claiming that she was rather inflexible, while Charles said that "flexibility" was a prerequisite for service. In the aftermath of the events experienced by all participants and the ways in which they managed, it certainly seems that Charles was correct in his assertion.

The participants' understanding of what the call is and how it is worked out became the basis for the way in which their realities were shaped. It became apparent that for most participants, the unwavering and unquestioned assumptions around the call of God to serve on the mission field were based on minimal information. This was inconsistent with the experience of Grace, who had not felt this call and tested it at many levels before eventually leaving Australia.

5.3 Selection of missionaries

The importance of a careful selection process for future missionaries was noted by Barnett et al. (2005) and Hay et al. (2007), and such care was consistent with the experience of participants in this study who reported they were selected for a specific project and country in which the mission organisation was involved, based on whether their professional training and experience would be the best fit. From the information shared by participants, there appeared to be no screening for psychological stability or personality traits that would best fit the complex life on the mission field. The selection process for Charles was based on a vacancy becoming available in a mission context; however, on reflection, it appears that in the years prior to taking up the position, Charles had been struggling to find a satisfying and productive use of his strengths and training. There appeared to be a certain fragility around his sense of self which was easily compromised once he was in challenging circumstances on the field. His wife, Deb, made considerable professional sacrifices to move to the mission field, giving up the position of School Principal to that of a home-schooling mum. There was no consideration in the selection process of how this significant change of roles may impact her sense of self, which in fact, became a considerable struggle for her over the years on the field. Her move from a country where women were seen as equal contributors in the workplace to a country where women were relegated to a position of being an unseen and

unheard shadow in the background of their husbands was a notable struggle for Deb the entire time she was on the field. During the interview with Deb, many tears were shed as she described her ongoing struggle to be heard and affirmed by leaders, as well as recognition of her expertise in specific fields. This struggle was often accentuated as she needed to go through her husband for simple requests such as maintenance on their house. Beth also shared this struggle in the workplace as the relationship with her national male superior was never going to be repairable in a country where women have scant education and would never have been in the workplace alongside a man. The placement of a young woman in this workplace indicated a significant lack of cultural insight on behalf of the sending organisation. This meant that the working relationship would succeed to the benefit of the whole project. While the desire to serve on the overseas mission field was very strong in each participant, there appeared to be little to no examination, either internally or by the sending agencies, as to their overall suitability for the mission field. Grace was the exception to this assumption as initially she was told that she was too inexperienced to be sent, but a short-term project put that to the test. This was, perhaps, an effective process in confirming this call to serve and discerning the suitability of Grace as an applicant. Ultimately it seemed that the initial desire to serve on the field was fuelled by many emotional experiences, which may or may not have been an accurate measure of the suitability of a candidate.

While the placement of participants in this study may not have been influenced had they had psychological screening, what could be seen was the unsuitability of some of the leaders who had oversight over some of the participants. Some leaders' inability to manage challenges effectively certainly contributed to heightened stress levels and placement breakdown (Dimos et al., 2015; Stephens, 2018). Perhaps psychological screening of the leaders named in this study may have alerted sending organisations to the ill-preparedness of some for leadership positions, although they may well have been very effective in the original

roles they fulfilled on the field. From the background supplied by the participants, it could also be seen that all participants had a faith expression consistent with that of the sending organisation. While this may have contributed to a more homogenous and supportive understanding of the role of the missionary, it could be fraught with a growing mistrust and disillusionment with the organisation. This could be seen in Charles' case, who said, *"I often think that the cynical part of me says, the mission field is a problem to be solved, therefore, oh, you want to go, that solves the problem, it's now your problem."*

He went on to add,

The church, to my shame, lowered the wages for Filipinos and Asians. I don't know what happened...so they cut the wages severely and when someone spoke to the local treasurer and said these people are not going to stay. His response that he related to me was, there are plenty of other Filipinos who will work for those wages.

In confirmation of Charles' feelings, Deb added, *"And I know people say that the church will really look after you, but if they haven't looked after me in the past, why would they do it now?"* Both Charles and Deb expressed their disillusionment with their sending organisation within the confines of the interview. It was clear that their discouragement had not been expressed in other contexts, with a pervasive sense of loyalty to the organisation emerging, which prevented them from challenging the organisation at leadership levels, thus taking the option of leaving quietly. By the time they were leaving the field, they were both worn down by years of tension which compromised their mental health. This, in turn, meant that they did not have the energy to challenge the system they were caught in.

5.4 First encounters in the new country

Although participants encountered unfamiliar environments once in their new country, they all appeared to enthusiastically embrace the challenges brought about by

weather, climate, housing, and language as part of the journey of a missionary in a developing country. Overall, participants reported that the larger organisations were better resourced in terms of member care on arrival. Interestingly, the interviewer noted that all participants perceived their entry experience to be just part of the journey, or as one put it, “*the adventure*,” although the experiences did challenge their previous competencies and self-sufficiency. The desire to fit into the new culture was evident in the adoption of national dress for some and the keenness to live with and get to know local people, where appropriate. All spoke with a general acceptance that this is what life is like on the field, with their pressing need being to work out how to adapt to it and find the best ways to manage the new situations. It appears that all participants were able to do this in a reasonable timeframe and with considerable resourcefulness. What stood out in all participants was adaptability, flexibility, and creativity, with a notable ability to problem solve under difficult circumstances. Beth summed it up with, “*it was- okay, we’re just going to work it out, we’ll just take it each day as it comes.*” Even though she said many times that the initial experiences were overwhelming and doubt as to whether they had made the right decision began to seep in.

Each participant commented on the level of organisational support received when they first arrived in the country, with a variety of responses evident from this discussion. It is apparent that support from the sending organisation is necessary for a less complicated beginning in the new setting (Andrews, 1999; Hay, 2007; Rosik et al., 2005). The lack of local knowledge, and for most, language proficiency, left all participants dependent on others for survival in the first weeks and months, which Hay (2007) notes is the essential role that on-field orientation plays. Many who had been very self-sufficient and capable in the Australian setting found the need for assistance from others confronting, with one participant sharing that the struggle in the early days in the host country made her feel like a baby again.

For some, assistance from the sending organisation came readily and helpfully, while others were forced to be self-reliant, which for those missionaries seemed to leave an ongoing question around the supportiveness and trustworthiness of their sending organisation. Beth wondered why the organisation would be continuing to sponsor an older missionary who had been serving in another country for a decade to join their team. Their lack of cultural sensitivity and superior demanding way with the local people was a source of embarrassment and distress for this couple in the early days in the country. This person also made group dynamics very difficult, which again, no one seemed to address. This raises the question of whether mission organisations ever recall missionaries who are the source of behaviour that compromises the focus and expression of the organisation. It appears that problematic members can be moved sideways, as in the case of Grace's nemesis, or are even promoted into a leadership role, as in Deb's antagonist. These reports raise important issues around how mission organisations address those who cause difficulties and, in some cases, cause so much distress, leading to attrition in their colleagues.

Subsequently, the notion of the organisation's trustworthiness was evaluated in the latter times of the participant's service when it came to deciding whether to engage the sending organisation when difficulties began to arise. What could be clearly seen was that those sending organisations who had structured support for new missionaries on arrival also had clear and transparent pathways of support and engagement throughout the placement, and in particular when the participants faced difficulties, which is posited by Hay (2007) as essential for missionaries to be able to stay on the field. For some who had little support on arrival in the country, the lack of support continued throughout their placement and into the time of decision-making and return to Australia. As Deb so poignantly added, *"I don't have any confidence that will change, and I don't have any confidence that they actually care about us anyway."*

5.5 The unimaginable happens

The participants in this study encountered earthquakes, civil unrest, bombings, militant attacks, suicide bombing, the death of friends and colleagues, serious accidents, near-death experiences, volcanoes, inadequate medical resources, geographic relocation, and toxic teams, which Shapiro (2017) would name as big T traumatic events. Additionally, they experienced many small t events, such as friends moving away, witnessing accidents, medical diagnoses, hospitalisation, unsafe travel, and perceived bullying by colleagues. Although moving to a developing country where poverty, disease, natural disasters, civil unrest, and persecution of Christians is generally well known, the participants in this study were largely unprepared for confronting such events personally. It appeared that in their minds, they were there to help others negotiate such times, and it seemed that no one had pondered whether living in such a mix of disasters and unrest could directly affect them. In fact, some commented that they felt quite safe as they were living in a compound and were not unduly concerned about the reports of assaults or bombings nearby. As the participants were driven by a call from God to serve in a particular field, there appeared to be little consideration that they could be in danger themselves, despite a small amount of preparatory training from their sending organisations. The perceived call from God was thus acting as a protective factor when they were facing traumatic events, although it appeared that in having a call, they also assumed that God would protect them from adversity. Preparation before leaving Australia included lockdown and kidnapping procedures and earthquake response. It seems that for some participants, when the procedures were taught, there was no relevance to actual events and therefore, the training was not assimilated, nor able to be appropriated when needed. Ana commented, “*at school we were really regularly doing earthquake evacuations to get the kids*

ready but interestingly when it actually happened, my little son ran up the stairs to hide under his bed. We go outside remember!”

Eric also added how his directions during the attack on the compound were very wrong.

So I said to the kids, remembering my earthquake drill, let's get under the tables. So we all went under the tables. When I look back on it now it's ridiculous but anyway... Well that was if there was an earthquake, it was lock-down, but I just went into earthquake mode... I wasn't really thinking. So anyway after a few minutes we heard more gunshots and I thought let's go into next door. So, what I could have done was to put tables against the door, but I didn't.

In this situation, the relaxed attitude toward the external threat and inability to recall and appropriate the correct procedures may have been calamitous. The general assumption that God would protect them regardless of their actions is troublesome. Personal accountability and action must be considered alongside a theological understanding of God's sovereignty. The conflicting assertions and interpretations from scripture fuel the assumption that they would be protected and, therefore, should endure all that befalls them. In 2 Corinthians 4: 8-9, Paul testifies to God's protection, "We are hard pressed on every side, but not crushed; perplexed, but not in despair; persecuted, but not abandoned; struck down, but not destroyed." However, it is known that Paul also was imprisoned many times, suffered from a 'thorn in the flesh', and was thought to have eventually been beheaded, as many Christians were in the reign of Emperor Nero. Those on the mission field may believe that because they are called by God to the place of service, God will divinely protect them from all adversity in the situations that befall them. Some may also believe that the situations are a test from God that they must endure. This is in contrast with those aid workers who do not have a faith expression and so do not expect divine protection. They may be more able to access help

when needed and are less likely to endure past the point where their mental and physical health is compromised.

Despite the experiences of some participants, one participant shared that they had been well prepared for what to do in an earthquake, right down to having a 'go bag' prepared, containing essentials they would need once they had evacuated. This, of course, was left behind when an earthquake occurred, nor did it contain all that was needed for the care of their child. What they were unprepared for was the emotional toll the constant aftershocks took and what to do once they had evacuated. This appeared to be consistent with all other participants who encountered both natural disasters as well as attacks from insurgents.

It is apparent that there had been some superficial training for some events the participants were likely to encounter. However, their actual experiences far outweighed the scant preparation they had received. This lack of preparedness may be related to their premature return to Australia. This finding is consistent with the studies of Dimos and Hasz (2017), who found that poor pre-field training was a contributing factor to missionary attrition. Early researchers proposed that exposure to stress-provoking and trauma-related incidents in missionaries needed to be addressed, as there was a clear link to the breakdown of missionary placements and their early return to the sending country (Carter (as cited in Schwandt & Moriaty, 2008); Lewis Hall & Schram, 1999; Miersma, 1993). As noted previously in this thesis, O'Donnell and O'Donnell (2013) and Rosik and Borisov (2010) suggest that attention needs to be given to the effects of traumatic experiences on missionaries, but according to the participants in the study, managing the effects of trauma was not addressed in their pre-service training.

The evidence from the participants in this study demonstrates that training in critical incidence response is not necessarily effective when the situations missionaries are exposed to are outside of their experience. Therefore, learning is not integrated and accessible when

needed. The availability of in situ training and support from experienced and trauma-informed field officers becomes an essential component in the task of caring for the mental health of missionaries and their ongoing support as they negotiate the aftermath of overwhelming experiences. Participants found that after experiencing confronting events, their capacity to cope was reduced in day-to-day tasks, but their resolve to maintain service to others, as was their perceived calling, placed their own needs on hold. There was evidence that their perceived spiritual resources should hold them in good stead, which was true for some. However, for all, there came a time when neither their spiritual resources nor their resilience could help them maintain emotional stability.

Of surprise to the researcher was the intensity of emotional pain caused by a combination of organisational dysfunction and what clearly became known to the researcher as bullying from leaders, which led to the kind of relational trauma that Charles recounted. *“My own feeling is that the workplace environment has been abusive to Deb, abusive to Deb.”* Interpersonal difficulties and team conflict have been repeatedly named by researchers as among the leading causes of attrition (Blotcher, 2007; Dunaetz, 2010; Lee, 2019; Rance, 2017). Resolving conflict within a team context had not been a focus of any pre-service training, so participants were singularly unprepared for what was encountered on the field. Grace so powerfully emphasised this, *“I had never had an opportunity to defend myself either, so they never gave me, never said what’s your side of the story... I ended up looking like I was crazy.”*

5.6 The fallout

Understanding the effects of the situations encountered by the participants in this study was a clear aim of the research. It was apparent from the data that many participants had not recounted their journey in a succinct narrative before the interview and, therefore, not

appraised the overall impact on their well-being, even though they had a clear understanding that the circumstances they encountered had led to them leaving the field. After recounting the story of at least six traumatic incidents, Ana was asked by the researcher if she had ever counted them. Her answer was, *“No, no, so I think we felt hyper-vigilant, what’s the next thing coming at us.”* Ana, it seems, had never reflected on the cumulative nature of the events the family had endured, almost as if facing them was too much to bear. In this respect, the researcher was concerned that recounting so many experiences in such a short time may have an unhelpful impact on Ana’s mental health. In the phone check-in with Ana a week after the interview, this became part of the conversation. However, Ana confirmed that recalling all the events was a cathartic experience, which also served to validate why they had returned to Australia. It was as if looking at the entire experience helped her to see that no reasonable person could bear so much trauma in such a short time.

All participants shared stories of the breakdown of their mental health or that of their partner or children. PTSD was named by some participants, and although not specifically named by others, it was clear to the researcher that they, too, may have been included in this diagnostic category. Two participants spoke of having a complete emotional and mental breakdown, the effects of which meant that they could no longer continue in their roles and needed to return to Australia. Participants spoke of having panic episodes once back in Australia, while others had chosen not to speak about what had happened lest it trigger uncontrollable emotions (Briere & Scott, 2015; van der Kolk, 2015). Ana shared the confronting emergence of her son’s suicidality on returning to Australia, which had emanated from the traumatic injury and treatment aftermath in the country of service. Other participants shared the deterioration of their Children’s mental health once back in Australia, with anxiety being a regular feature, as well as socialisation issues. The breakdown of mental health in different degrees was consistent across all participants and appeared to be the most

confronting and difficult aspect of their time overseas (Briere & Scott, 2015; Eriksson et al., 2012a; Rosik & Borisov, 2010). Trying to understand what was happening, along with difficulty in accessing the correct assistance, contributed to the main reason most, but not all, returned home. This realisation is consistent with Erikson's (2012) and Schaefer et al.'s (2007) finding that 10% of all returning missionaries could be diagnosed with PTSD. This is further supported by Irvine et al. (2006), who asserted that 80% of the missionaries they surveyed had encountered a traumatic event, with many reporting significant remaining symptoms up to ten years post service. Research indicates that early intervention with helpful treatment protocols may assist in recovery and return to full functionality. This suggests that had participants had access to trauma treatment while still on the field or in times of home assignment, the need to return home permanently may have been averted (Briere & Scott, 2015; Levine, 2015; Ogden et al., 2006; Rothschild, 2011).

Given the research about the prevalence of PTSD and other trauma-related symptoms in missionaries and aid workers, there was little evidence that the participants in this study were prepared pre-service for the events encountered on the field. In some cases, informed support was not offered, even when sending organisations knew of the significant events encountered by their teams (Gallagher, 2013; Grant, 1995; O'Donnell & O'Donnell, 2013; Rosik & Borisov, 2010; Thom et al., 2020). That is not to say that support was not offered, but that the support given appeared not to be trauma-informed, nor was support easily accessible. The reliance on medication, such as sleeping aids, and depression and anxiety medications, appeared to be one of the few treatments available for some. In this study, the participants who had significant trauma-informed intervention after experiencing traumatic events were the ones who appeared to have the least ongoing trauma-related symptomatology. Eric and Faith had immediate and ongoing professional debriefing after the attack on their compound. *"I remember feeling good that we could, that we had some*

counsellors there who could lead us in a debriefing and we could hear from each other and kind of put some pieces together of what had happened.” Rance (2017) confirms that trauma-informed interventions post-event work toward ameliorating the symptomology.

Many participants were prepared for earthquake evacuations and lockdowns, and there was some awareness that they would be in volatile political situations. However, they were underprepared for the effects of the cumulative stress and trauma load, as well as the impact of not being able to negotiate organisational dysfunction, or in some cases, the bullying behaviour of leaders. Although research demonstrates that conflict within a team contributes to one of the most prevalent reasons for missionaries leaving the field, evidently, conflict management and resolution were not a consideration in training programs for these participants (Blotcher, 2007; Camp et al., 2014; Rance, 2017). Where participants accessed external help in working through conflict, it would appear that those who were consulted were either not trained in conflict resolution or had a vested interest in one party and thus were not impartial in the way in which the information was processed, or decisions made. In one case, the person who was the on-site mediator was, in fact, the cause of the internal issues and whose exhibited bullying behaviour was the cause for several staff leaving. As the issues were contained ‘in-house’ there was no direct channel to the institution back in Australia to either report or request outside intervention. Stories were shared around concerns that privacy and confidentiality could not be maintained in the organisation as everyone seemed to be related in some way. Maintenance of privacy and concerns about stigmatisation, whether real or perceived, were notable in some participants or their spouses, with evidence of a religious expression that denounced psychological struggle and intervention apparent. *“He was concerned with whoever it might be shared with, what would be the repercussions”* (Bagley, 2003; Hogstrom & Gingrich, 2014; Peteet, 2019).

The stories recounted by the participants revealed a pattern of cumulative stressors which had gone unnoticed by the participants until the narrative unfolded in the research interview (Follette et al., 1996). All had told parts of their story to others, but it seemed no one had recounted the journey in the way in which it evolved in the interviews. For some, putting all the incidents together in a timeline narrative drew attention to just how many difficult events they had encountered, which made sense of the subsequent decisions which needed to be made. When asked if she had ever told her story from the beginning to the end Ana answered, *“I don’t think I’ve told anyone from beginning to end all those different things... with my husband I’ve spoken about fragments of that at different times, but I wouldn’t really want to talk about them at all.”* For some, the incidents were concurrent, for instance, ongoing high-security risks because of attacks on aid workers and Christians nearby, plus the nature of their job, which was high involvement with local populations who had undergone traumatic circumstances, as well as severe conflict within the team itself. For others, it was dealing with personal health issues while encountering serious injuries to family members, as well as knowing that a family member back in Australia was facing a possible life-limiting medical diagnosis. While many issues were running concurrently, other events happened in quick succession, which increased the overload on the limbic system in some participants, resulting in the breakdown of physical and mental health (Levine, 2015; Ogden et al., 2006; van der Kolk, 2014). Each incident on its own may well have been managed, but so many simultaneously and or in a short period was an enormous stress overload resulting in psychological and physiological symptoms (van der Kolk, 2014). At the same time, the situational stressors were exacerbated by severe weather and climate events, political unrest, negotiating language, and the lack of basic medical help. For some, the confronting cultural practices, for instance, burying someone as soon as they had died, and archaic medical practices further entrenched difficulties. Negotiating more nuanced cultural

norms, such as the role of women in the workplace and how women should dress and behave, also need to be considered as further stressors, all of which result in cumulative trauma (Polusny et al.,1996). Beth described her workplace situation:

So I was coming to a full national team, all male, he'd worked for (...) for about 20 years ...we were equal in on the job hierarchy, and hierarchy is everything... I was a female 26-year-old ex-pat, coming in and given the same job title as him, the same level.

Her friend told her, *“he was ticked off right from the start, he was never going to take you under his wing, he was never going to respect you and he was going to make life hard for you from the start.”*

Additionally, what also became clear in the interviews was the effect of vicarious trauma on the participants, that is, seeing the impact of atrocities and disasters on those around them (McCann & Pearlman, 1990). The sense of helplessness in the face of a disaster was evident in some participants, with the impact of unending poverty and endemic cultural practices that prevented those they worked with from ever finding autonomy and self-efficacy difficult to manage (Cohen & Collens, 2013; Rance, 2017). Beth commented, *“No one had the energy to look after other people because everyone was so busy just trying to get through themselves.”* Seeing the effects of war and natural disasters, both in the countryside around them and in the severe losses people had experienced, left some participants feeling a sense of helplessness and hopelessness, unable to do anything of significance to effect change in the lives of the people around them. *“It just wasn't the same as before because so much of resources and the focus was on earthquake relief,”* commented Beth after the earthquake (Makadia et al., 2017).

5.7 Leaving

Considering that all participants were serving in a foreign country as a result of a sense of a direct call from God, leaving the field came with significant anguish for all. Most had made a long-term commitment, with two couples already having served for more than two decades and others with no real thought or intention of ever returning to Australia. For three participants, the decision to leave was out of their hands as the local situation meant they had to be recalled. In these cases, the recall was temporary, and in time, they were able to return. What was true, though, was that they did not return to the same situation; for one, it was a different team in a different city, and the other couple returned for a season in another country with a significant reduction in the numbers with whom they were working. Brown (2007, p. 317) reports that those who evacuate to another country after a traumatic event “fare better” than those who return to their sending country. This was certainly true of the participants for whom this was the case. Grace commented that evacuating back to Australia was a very difficult time in her life. *“I was just in a total state, and I just couldn’t get better in Australia because people kept asking me about it all the time. And I had to keep reliving it.”* She found little understanding of what she had been through (Sippel et al., 2015). Brown (2007) suggests that the support felt from those who have been through the same experiences is both a healing and a resilience factor. He goes on to say that those who have good relationships within their team will benefit the most from staying together after a traumatic event, as it was shown that when faced with traumatic situations, supportive personal relationships on the field can strengthen resilience. For the remaining three couples, the decision to leave was fraught with uncertainty, guilt, and a mixture of volatile emotions.

One couple left the field with significant plans put in place for both their leaving process and their replacements. Although they put in place a well-organised leaving process,

they still left with regrets that the work they had done in their years of service would account for nothing since they had not been able to see it through. However, there was a sense that God had the next steps for the work in His control and would provide the people to carry on the work, which afforded some comfort (Paas & Schoemaker, 2018). Three couples left with a sense of shame that they had let local teams down and the guilt that they had not been a good example of the faith because they could not endure. Beth shared her disappointment in herself that they had let their national friends and colleagues down by returning to Australia. *“We had a lot of guilt around, like you know that’s all well and good because we can just pack up and leave and go to our safe country, but people are still sleeping in tents there,”* which Makadia et al. (2017) propose indicates a degree of vicarious trauma.

5.8 Loss and grief

Coupled with guilt and shame came a serious sense of loss which was no better illustrated than by one of the children who *“cried like a baby for hours”* as he was separated from his best friend. Throughout all interviews, grief was the one noticeable emotion that emerged in several participants while speaking of the death of good friends on the field. *“It was a really distressing time. So she was my closest friend. She died in my arms,”* shared Ana. The loss was exacerbated further by local burial customs that left them without a due course of action in which to process both the tragedy that had ensued as well as their personal loss. Concurrently, each death was situated within other crises, further confusing the emerging feelings. *“I haven’t cried from a long time thinking about him.”* The unprocessed tears, held for many years by Eric, spilt over into the interview. What was evident to the interviewer was that there had been little awareness and processing of the significant losses experienced by all participants, with this lack of insight confirmed by Selby et al. (2009) and Kostohryz et al. (2014). Disenfranchised grief, which is “the grief that person’s experience

when they incur a loss that is not or cannot be openly acknowledged, publicly mourned or socially supported,” is often unrecognised by both the missionary and their supports (Doka, 2009; 1999, p. 4). Certainly, the participants in this study had little opportunity to mourn losses in a way that would have enabled a healthy grieving process (Worden, 2001). This was expressed by Eric “*we didn't actually get to any of their funerals.*” Some of the losses experienced by the participants on return to Australia are what Doka (1989, p. 321), suggests as being “loss of adventure, loss of friendships, loss of lifestyle, loss of purpose, loss of experience, or a loss of idealized origin culture.” Of significance is the loss of a sense of self and an idealised worldview. “*We loved the country and the people. We'd grown to love them so much,*” was a sentiment expressed by participants. Beth shared the lifestyle of the country they were working in “*we just miss life there and we miss our friends, and we miss the work.*” This loss of lifestyle was a thread shared by all participants, which is a clear indication of why no one wanted to leave. This loss was exacerbated for some by the difficulties they experienced in reorienting themselves to the Australian busy and isolating society, which was very confronting and unsettling (Camp et al., 2014). Beth shared her pain about this. “*I spent most of the night sitting on the toilet crying, not knowing... but it was just this stark, stark contrast... this is what life in Australia is like.*” The collectivist nature of the field countries, as well as the compounds where some participants lived, assisted in developing positive relationships, which were endearing factors for the participants. It was in this crucible of relationships that secure attachments were formed, which had the possibility of being a protective factor for those enduring traumatic events that were not of an interpersonal nature. Once back in Australia, some participants found themselves floundering as they searched to find a new purpose and direction. The sense that they had been overseas because of a call from God left them with the question of ‘What will I do now?’ This loss of significance and purpose was poignant for some. As they had been out of Australia for so

long, they knew that they could no longer keep up in a technologically advanced and highly skilled workforce in Australia. This, in itself, posed a problem for several participants who were unsure of job possibilities back in Australia or whether they could ever really ‘fit’ into the Australian culture. Kostohryz et al. (2014) address the difficulties faced by returning missionaries, contending that re-entry is often the most difficult part of serving as a missionary.

Grace felt like she had lost herself through the time on the field and in the process of being recalled to Australia, as the comments of her teammates had called her self-identity into question. She tried to change her personality to fit in with their expectations while second-guessing all her conversations and actions, “*and I kept trying to find ways to make myself smaller to make room for(...).*” Makadia et al. (2017) indicate that self-blaming and a disrupted sense of self are consistent with vicarious traumatisation. It is curious that Grace entered the mission field as a confident, articulate, positive young lady and left as a self-doubting, anxious, and physically unwell person after such a short time in her posting. The power of continual onslaught from outside the compound and internally from a team that should have provided safety proved insurmountable.

The loss of an opportunity to recognise the losses and therefore grieve, as would be appropriate, further complicates the overall grief process. Overall, the findings from this research confirmed the points made by previous researchers that exposure to trauma in its many forms contributes not only to the loss of missionaries on the field but the loss of self in relocation and finding new purpose. The lack of recognition of the losses encountered and the missed opportunities to grieve appropriately further exacerbate the emotional overload of those for whom loss is the ongoing reality of being on the field.

5.9 The children

Adults, it would seem, have the autonomy to make decisions on behalf of themselves and others and have enough life experience to make those decisions by weighing up all the advantages and disadvantages of such decisions. Unlike their parents, children do not have the same autonomy and capacity to know and articulate their desires, which means that in the context of making very difficult decisions, their wants cannot be fully considered. For the two families with older children involved in this study, the children appeared to suffer significant impact in the move back to Australia, with one, in particular, exhibiting suicidal ideation. Kim et al. (2019), suggest that some MKs suffer significant adaptation issues upon returning to their sending country, especially around forming new friendships. It would appear that all the children involved were very resistant to leaving the country they were living in, which for some, had been their home from birth. *“Our kids said don’t take us back to Australia”* reported Faith and Eric. They had left the country under traumatic circumstances, and trying to assimilate back into life in Australia held significant challenges as well.

Not only was leaving difficult for the young people, but they had also been exposed to many very traumatising events. This included near-death experiences of parents, and themselves, being caught in civil unrest, as well as witnessing the death or injury of others. Furthermore, being the subject of violent attacks on their living compounds increased their vulnerability and loss of safety. It is little wonder that Kim et al. (2019) suggest that MKs have “lower levels of psychological well-being” (p. 1873). This is apparent in the young people whose parents were interviewed in this research project *“life back here for him has been hard.... socially he lacked confidence in who he was as a person,”* remarked Faith about her son.

However, not all MKs are traumatized or need help to resolve field experiences, as Deb shared that her children's time living in another country was positive. Perhaps this was informed by positive experiences, with no exposure to traumatic incidents or the need to withdraw hastily from the country. Her children had already returned to Australia when they decided to leave the service country. As Kietzman et al. (2008) suggest, some MKs benefit greatly from their growing up years on the field. Deb's own experience of being an MK would challenge this notion as she spoke of being significantly traumatised due to being sent back to Australia for school as a 13-year-old without her parents. She spoke of being "bewildered" and "lost" as she attempted to negotiate a world that was totally foreign to her. It seems MKs may benefit richly from cross-cultural experiences and from challenges that can be managed with support from parents and other missionaries. However, trauma, by definition, is not easily managed, and children and young adolescents need ways to process events and difficulties.

5.10 Survival in the face of the overwhelming

This study would be incomplete without noting what helped the participants negotiate and survive both the traumatic experiences and the relocation back to Australia and, for most, permanently leaving the mission field.

5.10.1 The sending organisation

It would be fair to think that sending organisations would be highly involved in supporting field staff during a traumatic event and following such an event. However, participants had varying degrees of support, as noted previously in this thesis. All organisations were very willing and proactive to engage external counselling support for their members. Some sent pastoral team support to the sites, which evidently was of great

assurance to participants *“Two counsellors arrived quite early on... I remember feeling good that we could talk, that we had some counsellors there”* (Eric).

The extensive research into the effects of trauma on humanitarian aid workers provides helpful insight into the place of the overarching sending organisation in alleviating or exacerbating the impact on workers. The similarities in the work, as well as the organisational response, is only differentiated by the overarching aim of the two groups, with evangelism being at the core of the work of missionaries. The aim to alleviate suffering and assist with building resources that improve the quality of life of people lies at the heart of both groups. The feedback about the sending organisation from the participants in this study appears to replicate that of the participants in studies with aid organisations (as discussed in more detail below).

5.10.2 Trustworthiness

The mitigating factor in utilising the support systems that sending organisations had in place was how the participants perceived the trustworthiness of the organisation. For some participants, a lack of trust in the sending institution appeared to emerge in their early experiences on the field. Harder and Foote (2016) indicated from their research that 40% of missionaries lack trust in their leaders. In the current study, one couple said that they had lost all trust in the institution’s ability to support them or, at the very least, to listen to their issues. There was no clear pathway within the broader institution to access any grievance process. They were not followed up by anyone in the national office or in the head office in Australia to see if they were OK or to find out why they were leaving key positions. To maintain theirs and the organisation’s integrity, *“we’ve tried to come up with an answer that doesn’t reflect too much negativity, our answer is the balance has changed, we need to go back and spend more time with our family. No, we don’t but that’s what we’re saying,”* remarked Deb. In

essence, they lied to protect the organisation. This meant that issues endemic to the organisation were not addressed at the time. They knew of one other couple who had left the country because of similar issues, which were likewise not addressed at the time.

Beth expressed her mistrust of the organisation many times throughout the interview. However, her words were often discreet, as the overall impression she gave of the organisation was that they supported them very well during and after their evacuation, which was in her more current memory. Certainly, as reported by Beth, the ongoing home support was welcomed and consistent. Early in their relocation, the lack of a team leader to greet them on arrival in the country and having to ask for help to negotiate where to buy food and what was safe to eat left them with a sense of isolation. They were poignantly aware of being on their own as they tried to find somewhere to live by walking the streets with a note written in the local language to communicate their need. Beth could not remember if the assigned link person was in the country, let alone available to help them when they arrived. These experiences all added to the sense of lack of organisational support. Added to their early experiences, Beth also had to negotiate working in an office where it seems the line manager did not know of her impending arrival and subsequently refused to work with her. Later she was told that the posting would never work because of the male hierarchical society. This was already known prior to her starting, but she seemed to be thrown to the wolves by the organisation anyway. In retrospect, she discovered that the organisation had made a sudden decision to replace all ex-pat department heads with national leaders who were not ready for the roles. The goal was good as it meant that the international community was no longer needed once leaders had been trained and supported in their roles. However, the organisational decisions made were ill-thought-through and counterproductive to effective work, thus further enhancing Beth's mistrust of the organisation. Lopes Cardozo (2012) draws attention to the reports from aid workers who named organisational systems as being

counterproductive to the work and the source of stress for many. Beth would have liked pastoral field staff to support her through the difficult work situation, but this was not forthcoming. It has been found that job satisfaction was increased in aid workers by having supportive and involved field staff which is consistent with the findings with missionaries (Young et al., 2018).

For another couple, an apparent mistrust of the sending organisation prevented them from alerting the organisation to serious mental health issues once they emerged. *“He was really concerned that if we sought help from our sending organisation directly, he was concerned we’d be forced to go home,”* said Ana. It seemed that the key to the continuing theme of resistance to being sent home was a lack of understanding from the personnel back in Australia. This was possibly more an omission; that is, what was not there related one participant. It was not knowing what the process would be in the organisation if they had any trouble or who exactly they would go to. Welton-Mitchell, in the UNHCR (2013) report on humanitarian aid workers, noted that 52% of field workers did not know whom to contact or where to go to find support and resources for stress and trauma. Other participants received significant support from their sending organisations during and after difficult circumstances, which aid workers noted as being helpful (Young et al., 2018). In most cases, the organisation’s trustworthiness was measured by the availability and provision of intervention, as well as an understanding of how much autonomy was extended to the participants to make decisions concerning their own welfare. This was particularly helpful for Faith and Eric when they had to evacuate, as their sending organisation included them in the plans and supported their decision not to return to Australia. When people have a sense of control in their circumstances, the effects of trauma may be lessened and act as a protective factor (Veronese & Pepe, 2017). (Stephens (2018, p. 225) notes the importance of leaders in mission teams who invest “unhurried” time in mentoring new missionaries and who demonstrate integrity,

accountability, compassion, and a calm response to crisis situations. This was also reported by participants in research with humanitarian aid workers who wanted managers who took the time to listen (Rizkalla & Segal, 2019). What was needed in some situations was the involvement of care personnel who took the time to visit and also invest time to deeply listen to the stories of their missionaries and note what was clearly evident but not said. In no situation was this more evident than in the story Grace told when the field organisation sent a psychologist to assess the team breakdown. Her frustration that no one would listen to her left her feeling like she was the crazy one. Her further mistrust of the field organisation was increased when in her new posting, she found out that her antagonist was known in the community to have been involved in a similar issue ten years previously, where a missionary had been deemed psychologically unstable and moved on. This missionary went on the serve elsewhere very successfully for another 15 years. Likewise, for Ana, a mistrust of the Australian leader of the sending organisation developed because of her management style. She was well known for knee-jerk reactions to situations where she insisted the best approach in given situations was to stop the work and pull the teams out. Again, the inept management style of leaders was named as a significant stressor for aid workers (Young et al., 2018). The overtone of not being listened to ran deeply with both the participants in the current study and many humanitarian aid workers.

An undercurrent of mistrust concerning organisational attitudes towards psychological health was evident in some participants and expressed by Ana *“he didn’t want to share at all, and he was concerned with whoever it might be shared with what would be the repercussions.”* Some found it difficult to inform their sending organisation that they were struggling, preferring to source psychological assistance outside the organisation *“she was totally outside the mission community and was a Christian, an American psychiatrist.”* There may have been two factors at play in this. Firstly, there was some evidence of a sense of

spiritual failure in admitting that they were struggling, and secondly, there was a gap in communication from the sending organisation that psychological support was available and that emotional struggles would be viewed as a normal part of missionary service. The stigma around not being able to cope mentally and emotionally was evidenced in these participants, with one participant sharing that they thought if they shared what was happening, *“It might be held against us,”* which is consistent with previous research (Hartog & Gow, 2005; Wamser et al., 2011). The stigma around mental health appears to be a universal concern and is also seen in front-line emergency workers, as reported by Wang et al. (2021).

Overall, it would be fair to consider how effective the mission work might be if field personnel and mission organisations could be seen as trustworthy and available. In this study, all participants spoke of the mistrust of at least some parts of their organisations, with others expressing their total disdain for the organisation. In some cases, the levels of mistrust resulted because of neglect and even abuse by leaders. In other cases, the wariness developed over time when leaders failed them in more subtle ways.

5.10.3 Counselling

Counselling was accessed at some stage in each participant’s ensuing process, either while on the field or back in Australia. This was for themselves as well as for partners and older children. It is evident from this finding that all participants and their families experienced psychological distress, which indicated that assistance was necessary (Camp et al., 2014). It was clear that, except for the incidental availability of a counsellor in situ after one incident, there was limited availability of psychological support on the field; Beth commented about a psychologist after the earthquake *“she was kind of trying to support the whole team who were all having their own troubles at the time.”* Participants expressed the need for counsellors who were well informed of the complexities of mission work *“It would*

have been really great to have debriefing with someone who was actually specifically trained in missions debriefing.” They also wanted someone who was, at least sympathetic to their Christian faith (Jensma, 2017). It seemed that the requirement for a counsellor to be a Christian was linked to having an understanding of what it meant to have a ‘call’ from God to live a sacrificial life for the benefit of others. One participant reported that one counsellor they sought could not understand the grief around not being able to fulfil the ‘call’ from God (Rosik et al., 2009). Grace recounted her experience with a cross-cultural psychologist. *“She wasn’t a Christian and she just was on a different planet with those issues, when I was talking about reconciliation, she was like cut them loose Grace, why would you go back to these people?”*

5.10.4 Protective factors

Regardless of the intensity of the events that participants had experienced, all demonstrated resilience and strength to endure such an onslaught on both their physical and psychological being. When asked how the continual barrage of traumatic events affected her, Ana answered, *“I just stayed strong and well.”* It could be seen that there were many personal characteristics as well as external factors which contributed to their well-being and mitigated further risk.

Of great importance to many participants were the sustaining prayers of family members, some of whom attested to being woken in the night to pray for their family overseas. Beth shared, *“You know there were certain moments when mum would talk to me the next day and say, like I was praying for you at this particular time, did anything happen”* (Bauwens & Tosone, 2010). The understanding of Divine intervention and protection sustained some participants through many trials on the field. Eric recounted, *“I felt like that when we go these stories of the angels saving people that started to come out over the few*

days afterwards, we were just aware that God has somehow saved us and had done a miracle.” Ana also had a felt sense of God’s protection through many events. The acknowledgement of God as the miracle giver and provider of safety was present in conversations, as participants told stories of protection where their safety was apportioned to the protection of God (Stamoolis, 2002).

All participants recounted their attempts to stay physically fit and healthy, understanding that a strong and healthy physical body was necessary for sustaining the rigour of the work on the field (Gerber & Pulhse, 2009; Silverman & Deuster, 2014). This included a commitment to eating well, which was sometimes enforced by the limited diet in the serving country, as well as participating in more competitive activities such as marathons. As transport systems were often compromised, walking and bike riding often became a mode of transport, thus helping to maintain a healthy level of fitness. Of interest was that although the participants demonstrated an understanding of maintaining a fit and healthy body as a prerequisite for maintaining fitness for service under difficult circumstances, there was no mention of the need to maintain strong and stable mental health as an aid to survival through difficult circumstances. This oversight in the participants’ stories possibly reflects the same oversight in their training, both pre-service and ongoing.

The faith journeys of the participants during and after their terms of service were varied. O’Donnell and O’Donnell (2013) maintained that missionaries need a healthy faith in order to maintain well-being and effectiveness while on the field. Furthermore, Rance (2017), in her examination of coping mechanisms employed by missionaries experiencing trauma, found that trust in God contributed to well-being in the face of traumatic circumstances. She also noted that participants in her study experienced lower levels of PTSD when social supports, resiliency, a sense of being called to mission, and “positive religious coping” strategies were in place (p. vi). The importance of God’s call to mission in maintaining

resilience in the face of traumatic experiences is also noted by Brown (2007). For the participants in the present study, the sense of the call from God and a strong desire to serve God, with all the sacrifices and trust that ensued, indicates a strong connection to God and a willingness to embrace the subsequent difficulties.

Connection to God was expressed in various forms, with some attributing to Him miraculous intervention and protection in perilous situations. Others shared that they were aware of being sustained by God during the tough times and were comfortable with panic-type prayer, which was all they were able to access in crisis moments. Quite a few participants shared that they found a new source of comfort from God during times of extreme pressure, including new spiritual practices that had not been previously available or known to them. Those who explored new spiritual practices during the difficult times and afterward could do what McCann and Pearlman (1990) suggest, is readjusting one's worldview to accommodate the new reality. Overall, what was observed in some participants in this study was a commitment to the call, which strengthened their relationship with God. This was shown in Grace's words, "*I think I have a greater sense of the depths of despair that you can get to, but of God meeting you in that.*" This commitment, in turn, strengthened their resolve to stay on the field through many difficult times (Cadell et al., 2003; O'Donnell & O'Donnell, 2013).

The perceived connection to God to whom is attributed a sense of stability, protection, and a sense of divine purpose is a point of difference between aid workers and missionaries. While it is certainly true that many who work as humanitarian aid workers would claim to have a sustaining faith in a higher power, there is no literature that investigates this. There will be many who work in aid agencies who have felt called by God to the specific work they are involved in but again, there is no research that investigates this link. Many aid agencies are secular in name and affiliation but are underwritten by Christian organisations and served

by Christian workers. This is not meant to be a source of deception, but it is a way to give support in countries where it is not safe to be a Christian. For these organisations the distinction is not as clearly defined by evangelism. There has been much criticism of humanitarian aid work, which has emanated from reports of a form of neo-colonialism, that exploits the countries they serve in. What is known as the ‘white saviour syndrome’ reeks of racism and superiority and offers, at best, band aids to the problems encountered (Kaler et al., 2019). In the same way, Christian missionaries can be accused of the same stereotypical behaviour over the decades. Kaler reports in her study of Christian aid workers in South Sudan that the component that set them apart from secular organisations was their way of ethically relating to the local people who identified as Christian. Rather than relating in a depersonalised, bureaucratic manner, the Christian organisations put importance on dignified, respectful personal relationships with the South Sudanese people. One of their participants contrasted the impact of the work by the number of people who were touched by the daily devotions offered rather than the fact that the budget the aid organisation allocated for the work was all spent (Kaler et al., 2019). In Kaler’s example, the more sustainable gift was given in the form of the offer of a relationship with God. This notion is supported by the participants in the current study, who prioritised relationships with the local people. Ana told the story of the death of her best friend, a local woman. Beth identified the local couple who took them in as surrogate parents. Eric identified his friend who had died in the terrorist attack and wept when remembering how he was not able to attend his funeral. Deb did not want to appear like a colonist, using local helpers to clean their new home in the new country, so she cleaned the house herself. Furthermore, was Ana’s son, whose grief at leaving his best friend behind was so significant that he did not want to live anymore, are all examples of the priority of building sustaining relationships.

Brown (2007) suggests that missionaries with a developed theology around suffering demonstrate resilience through difficult times. He notes that the recommendation from ReMAP II was that prospective missionaries should be required to submit a personal doctrinal statement on their theological stance on suffering. In this study, there appeared to be one spouse who was reported to have been struggling to maintain a faith expression due to having been unable to readjust their theological understanding around suffering. Charles also shared that *“it’s a massive existential crisis in many ways isn’t it?”* Which caused him to question the core of his belief systems. In essence, *“am I really able to tell people to hold fast to the end, to be faithful to death, it got too hard for us.”* Of significance, Charles is an ordained clergyman and a lecturer in biblical studies. Brown (2007 p. 317) addresses the sense of failure or “betrayal of a heavenly mandate” by suggesting that words from a key leader may resolve this common struggle which was sadly lacking at the end of Charles’ 30-plus years term on the mission field. Still, another participant expressed their disenfranchisement with the church (i.e., the denomination that sent them), expressing their woundedness due to a lack of support and continual victimisation by leaders. Panchuk (2018) calls this “religious trauma” (p. 506), which she proposes leads to an inability to engage in religious life, which this participant confirmed as being true as she was unable to go to church and was hesitant to engage with Christians. Certainly, faith and trust in God are stretched under difficult circumstances and is an area to be addressed by sending organisations and support personnel.

What was evident was that during crisis times, people reached out for God, and some found Him in unexpected and previously uncharted practices, as Faith shared:

God’s grown me in that while I’ve been there largely by introducing me to the idea of more contemplative prayer and quiet retreats and quiet days so taking longer chunks

of time with God and praying and thinking about the word in different ways to what I was brought up with.

Faith's experience is akin to post-traumatic growth, where positive things are known to eventuate as a result of difficult times (Ayawickreme & Blackie, 2014; Sleijpen et al., 2016). Cadell et al. (2003) suggest that during traumatic situations, people have found their spirituality to be a positive resource, which was true for many of the participants. In terms of Fowler's (1995) stages of faith development, it could be seen that many participants had moved from a synthetic-conventional stage of faith to a later stage. Spiritual crisis had challenged their belief systems resulting in a deeper faith expression and understanding of God in the world.

5.10.5 Attachment as a protective factor

For some participants, the loss of significant attachment systems provided by parents and close friends at home was replaced by a growing connection to and attachment to God once on the field (Kaufman, 1981; Pargament et al., 1998). Participants like Faith spoke about their dependence on God. *"God just took me deeper I guess, closer to Him,"* which provided a sense of safety in very unsafe situations. Dependence on God for nurturance throughout their time on the field indicated the "felt security" Kirkpatrick refers to as being activated (1992, p. 452). Participants such as Eric and Ana found God to be a safe container for their emotional overwhelm in difficult times. Granqvist & Kirkpatrick (2013) point out that secure attachment acts as a vehicle by which emotions can be regulated. It is noted that this was a process that was evident in most participants as they negotiated very stressful situations *"So I feel like I have a much greater sense of comfort, what it means for the spirit to comfort you in these situations,"* said Grace.

Conversely, it could be proposed that the early attachment experiences of abandonment Deb endured as a young person contributed to the breakdown of relationships on the field. (Wilkins et al., 2017). The daughter of missionaries herself, when there was no school in the new mission location, *“I basically was sent to go to my sister...and here I was this 13-year-old girl, totally in a new culture, totally bewildered and lost... it was the most traumatic year I had.”* The subsequent sense of abandonment as an adult by the same sending organisation appeared to exacerbate her feelings of mistrust and loss. As Mikulincer and Shaver (2012) found, early inconsistent attachment experiences contribute to less resilience in the face of difficulties. Mental representations which see others as possible threats may also come into play. This could also be observed in Charles, who found it easier to return to Australia than to deal with the endemic organisational problems. *“I’m conflict averse, give me the chance I’ll run away from it, and that’s what we’re doing... there’s enough conflict in my family, this is now where I want to be.”* In the application of attachment theory to some of the difficulties amongst team members on the field, it could be proposed that when physical safety was already compromised by the surrounding circumstances, team members’ attachment systems were also activated as an automatic protective measure (Feeney, 2004). As Brisch (2014) noted, maladaptive reactions result when stress hormones are activated. This may result in believing that a team member is the threat rather than the surrounding circumstances, as may have been the case for Deb and Charles, as well as the team member who vilified Grace. Feeney (2004) draws attention to the possibility of toxic team environments when conflicting attachment styles are activated, which was evident in the stories of some participants.

Insecure attachment styles can also be seen in the participants with more dismissing tendencies, which would include not asking for help until they had no other options. Others with a more secure attachment style, such as Grace, Beth, and Faith, readily sought assistance

when needed (Feeney, 2004). It is unknown whether seeking help from appropriate sources would have provided early intervention, which may have assisted participants in staying on the field, but the literature supports the assumption that it may have (Brisch, 2014; Feeney, 2004).

Four couples were represented in this study, although not all individuals were interviewed. There were also seven children to be considered in the evolving events which led to repatriation. As the interviews took place, it was evident that all four marriages remained strong, supportive, and resilient both during and after the traumatic events. The support that ensues from strong attachment bonds means that partners support each other through difficult times, as is evidenced in all four marriages (Pistole & Arricale, 2011). The six older children represented in this cohort also demonstrated strong, secure attachment bonds with their parents, given the data demonstrating they could protest with a sense of safety when they had to leave the field (Ainsworth, 1985; Bowlby, 1997).

Social supports from colleagues on the field are named by Brown (2007) as providing a protective relationship that is akin to an attachment bond. Sippel et al. (2015) reinforce this suggestion, implying that resilience is formed in secure family attachment relationships. These long-standing attachment relationships, however, may be seriously compromised as folk leave for distant countries, incurring separation from secure attachment figures. Being on the field, away from proximity to family and friends, forces the formation of new attachment relationships. These are often established within the teams in which people find themselves. If the team is cohesive and safe, the new friendships will eventually act as secure attachment figures and provide a 'safe base' to which those traumatised can return (Bowlby, 1997). If there are people in the team who pose a threat to team members, the attachment system is activated, and a loss of safety ensues. It can be seen that, in three of the teams represented in this study, at least one member in each team was assessed as unsafe by participants, which

compromised relationships, sometimes of the entire team. The words of Deb echo the abusive nature of one leader. *“From my office on the other side over the building, I heard a leader screaming at her, swearing at her.”* For some, the continual activation of the attachment system meant that the team was seen as toxic, so escape back to Australia was the only option (Pross & Schweitzer, 2010).

5:11 What was needed

During the interview, participants were asked, in hindsight, what would have helped them to remain on the field. The following discussion emanates from their answers.

5:11.1 Training

Dimos and Hasz (2017) proposed that, generally, poor training prior to leaving for the field accounted for some missionary attrition and Lee (2019, p. 247) asserted that it is “reckless” for missionaries to go on the field without training. Training prior to assignment overseas was a prerequisite for five participants interviewed, although there was a notable discrepancy in the training requirements, which varied from organisation to organisation. Training was embraced wholeheartedly and without reservation by those for whom it was required. For some, moving to college for training meant considerable sacrifice; the selling or renting of their family home to raise funds and placing themselves in a more precarious financial situation, which was embraced willingly, and unquestionably seen as part of the call to serve on the mission field. Those who were sent by a large Australian mission organisation had significant training beforehand, with the training offered in Australia. The training integrated cultural awareness as well as mission preparation, with theological training being a prerequisite. For those who were working in languages other than English, intensive language programs were provided on their arrival in their new country. The combination of intensive language school coupled with day-to-day exposure to language in the marketplace and the

neighbourhood ensured a working acquisition of local language to begin the tasks for which they were sent (Woodbridge, 2017). No training was mandated for the couple who was sent by a smaller international organisation, although it was suggested. It is possible that the lack of more comprehensive training meant they were unprepared for what was to come, leading to the breakdown of the placement. Interestingly the sending organisation was prepared to allow them to go under their banner even though they were underprepared, and it would appear that the field team was not prepared for their arrival. There was a sense of disappointment that they were not well received once in the country. However, the sense of adventure that emanated from having to find their own way served as an adventure and strengthened resilience for this young couple. They most certainly were unprepared for what they met when they first arrived on the field, despite having travelled widely and been on several short-term mission trips (Dimos & Hasz, 2017).

Of particular importance in this study was the investigation of whether any participant had specific training in recognising and understanding trauma and its effects, as suggested by Connorton et al. (2012) and Makadia et al. (2016). The heavy focus on the acquisition of theological education was a hallmark of participants' training; however, the need for understanding psychological process, recognising the symptoms of psychological distress, and knowing what to do once such distress is observed was clearly absent in the pre-service training of the participants (Eriksson et al., 2009). As Ana so clearly stated

I really think that having an understanding of trauma and how to help family members in trauma and how to help, I mean when you're on the field there's so many other members of your team that go through natural disasters, injuries, accidents, and I think we need to know more, because I really, I felt clueless and I wish that I'd known what the lady and the psychiatrist had helped me understand about how to

help my family members, or myself, when this happened. Because it's very likely to happen to us as cross-cultural missionaries.

Some participants had training using simulations in effective and safe responses during critical incidents such as a natural disaster or a kidnapping. One participant named the training she received as being PFA preparation, but as it was described, it appeared to be working with stress and relational difficulties within the marriage. One participant declined the offer of further training provided for those who were being sent to high-risk countries, and as such the content of such a program is unknown. The research of Turner et al. (2021) found that training in how to manage critical incidents, which provided a sense of mastery, increased the participants' levels of self-efficacy, which in turn increased resilience. Preventative training was seen to assist humanitarian aid workers in coping with the trauma encountered on the field, which in turn increased the longevity of service.

What was evident from all participants was that, in the range of circumstances represented in their experiences, no one had been prepared for the resultant emotional and psychological turmoil during and post events. There was no training prior to leaving the country, nor while on the field, about how to recognise and manage psychological distress during and after a traumatic event. Not only were the participants unprepared for what was to come, but those who supported them on the field had little understanding of how to do a psychological assessment, recognise compromised mental health, nor how to support those who were struggling, apart from keeping in contact and praying for them.

5.12 Summary

This research describes the journey missionaries take to fulfil the call of God to serve on the mission field. The stories shared in the interviews explore some of the challenges that missionaries met once on the field. In this chapter, the researcher endeavours to understand

their lived experience, from the time they first heard the call to the mission field to their eventual return to Australia. The findings discussed in the previous chapter are examined in light of relevant literature and insights formulated into what contributed to their eventual return to Australia. In understanding this journey, there is a clear connection between the experiences of trauma and the eventual breakdown of the mission placement.

The chapter, in the first instance, explores the multivalenced impact of the call of God, which for some meant that they remained on the field longer than was helpful for their mental health. The belief that they were on their field placement as a result of God's call also meant that there was an expectation that God would provide for their needs. When this provision was not forthcoming in a form they could accommodate, a spiritual crisis emanated for some.

Subsequent discussion centres around the need for strong and involved member care support when first on the field, and in particular when difficult events are experienced. Although member care was provided for some, the lack of understanding of the nature of a trauma response and simple tools to alleviate distress meant that, for the most part, the support offered was ineffective. The provision of psychological tools to understand and reduce anxiety and trauma responses may have equipped participants to fulfil their calling and remain on the field in some cases and reduced the need for psychological support once back home for all.

Consistent with research pertaining to the work of humanitarian aid workers it could be seen in this study the unrelenting nature of concurrent and continuous traumatic events and stress points (Eriksson et al., 2012a; Eriksson et al., 2013; Fast, 2010; Rizkala & Segal, 2019; Stoddard, 2009; Veronese & Pepe, 2017). Burnout, PTSD, crises of faith, and mental health issues are prevalent in humanitarian aid workers. Given they are often involved in the same

work, the same issues are predictably common in missionaries, as is borne out in the current study.

However, the findings also suggest that traumatic events may be less impactful due to a number of factors, including the nature of the call of God to service, resilience, member care support networks, counselling support, secure attachment bonds, and spiritual practices which nurture a strong attachment to God. While these factors work together to help mediate trauma responses in missionaries, the lack of a basic understanding of trauma symptomatology and how to utilise tools for stress reduction impair and or negate the potential gains found under more normal circumstances.

Chapter six will propose implications for theory, practice, and further research and provide a summary of the research project.

Chapter 6: Implications of the study, limitations, and conclusion

6.1 Introduction

This study aimed to investigate the lived experience of Christian missionaries who returned from the mission field earlier than expected. The study was undertaken to explore missionaries' experience of trauma and whether it could be a cause for attrition. This chapter discusses the implications of this research with the view to making recommendations for future selection, training, and support of missionaries, both before they leave for their appointment, during their mission work, and on exit from it. The aim is to increase understanding of the impact of trauma on missionary populations, the sending organisation, and local people. Lastly, the limitations of this research are discussed, with recommendations for future research in this area.

6.2 Implications of the study

6.2.1 Implications for practice

Overall, the theme emerging from this study has been that the mission field is indeed a precarious place for some missionaries and that attrition rates are linked to unsupported exposure to traumatic events, including unmanaged conflict. It is clear that insufficient consideration has been given by some mission sending organisations to the potential psychological impact of traumatic events, which could be experienced by missionaries, and to support processes and procedures in the event, a missionary is confronted by such experiences (Rosik & Borisov, 2010). It is hoped that the results of this study inform both future training and support processes for missionaries. In particular to address the risk of psychological harm to help reduce attrition rates connected to traumatic experiences. It is also

clear from existing research that these issues have been recognised for some time but have not been sufficiently addressed by mission sending organisations (Grant, 1995; Kotesky, 2007; Eriksson et al., 2012b; O'Donnell & O'Donnell, 2013; Thom et al., 2020). The work of many researchers into the psychological well-being of humanitarian aid workers helps inform future considerations for mission sending organisations as there are many similarities in the work.

6.2.1.1 Pre-service Training

Training supplied by sending organisations tends to focus on physical risk rather than psychological risk. Training is often offered in critical incident response procedures, lockdowns, evacuations, earthquake simulations, kidnapping, and safety procedures in politically volatile areas, as shared by the participants in this study. This training focus recognises that the physical safety of missionaries can be at risk and is of paramount importance to sending organisations and to the missionaries themselves. The question remains, however, as to whether adequate attention is given to the mental health and psychological well-being of missionaries, both on the field and once back in Australia (Irvine et al., 2006). The significant amount of research and literature around the effects of trauma and the breakdown of mental health leading to attrition in aid workers is pertinent to missionaries who are involved in similar work and face similar psychological risks in terms of exposure to trauma (Eriksson et al., 2012b; Eriksson et al., 2013; Fast, 2010; Rizkala & Segal, 2019; Stoddard et al., 2009; Veronese, & Pepe, 2017).

The current study suggests that more focused attention should be given to training in specific areas for both pre-service missionaries and support personnel in relation to psychological risk. The participants in this study could not name any pre or in-service training that had been given around trauma; what trauma is; how to identify common

reactions to traumatic events; and how to help themselves and others manage symptoms after a traumatic event. They also did not understand the impact of cumulative trauma, vicarious trauma, secondary traumatic stress, and the enormous allostatic load they were holding. When asked what would have helped them to remain on the field, participants said they wished they had known how to recognise the signs of emotional distress before it escalated to a diagnosable disorder. As a result, they knew what to do to help themselves and their family members. Participants said they would have liked to have had training in how to know what to do to care for someone after a significant traumatic event. Studies all concur that the friends and colleagues of missionaries on the field do not have the necessary skills and understanding when a significant crisis occurs. They suggest that all missionaries need pre-service training in recognising acute stress and trauma reactions and how best to manage them (Hogstrom & Gingrich, 2014; O'Donnell, 1995; Porter & Emmens, 2009). Participants also wished they had understood the possible effects of cumulative stress and trauma and how to avert the eventual impact that led to returning to Australia. It is suggested that training in these areas would be of benefit to all field workers (Connorton et al., 2012; Jones, 2006; Makadia et al., 2016).

A program that is meant for lay people such as missionaries as opposed to those who specialise in trauma treatment is psychological first aid (PFA). PFA is a program taught and utilised in industry and organisations globally, with a specific program written for field workers such as humanitarian aid workers and missionaries.

PFA involves humane, supportive and practical help to fellow human beings suffering serious crisis events. It is written for people in a position to help others who have experienced an extremely distressing event. It gives a framework for supporting people in ways that respect their dignity, culture and abilities. (World Health Organisation, 2011).

Because of its flexibility and accessibility, PFA has been recommended by Tessier et al. (2021) as a way of pushing past the attitudes toward mental health, which may mean that stigmatisation prevents people from accessing help.

It is suggested that this generic program become part of training for both those on the field and those who support them. When missionaries are faced with difficult situations, they are most likely to seek help from a colleague or friend before accessing more formal professional help (Hogstrom & Gingrich, 2014; O'Donnell, 1995). This has also been found to be true for humanitarian aid workers, where social supports have been named as a significant help in ameliorating the effects of traumatic events (Ager et al., 2012). PFA is an easy-to-learn, non-clinical way of supporting those who are suffering and in need of assistance from someone close by. PFA is different from what is known as psychological debriefing as it does not promote talking about the distressing event, which is known to be counterproductive to well-being (IASC, 2007, section 5.1). PFA honours spiritual and religious beliefs and recommends incorporating one's spiritual practices into support interventions. Participation in a PFA program by field workers could therefore serve to equip all mission teams with basic care protocols, thereby effectively mitigating the psychological impact of trauma.

6.2.1.2 Conflict resolution training

Conflict resolution skills and mediation services can be important for the support of the psychological health of missionaries. Conflict amongst team members is capable of causing reactions similar to those experienced by those exposed to traumatic events. As a result, conflict undermines the effectiveness of the team and drains resources (Dunaetz & Greenham, 2018; Rance, 2017). A surprising finding in this research is that team conflict elicited a trauma response in some participants in this study which was not addressed by field

personnel. It is therefore recommended that all prospective missionaries be trained in conflict resolution skills and have opportunities to participate in programs that enhance relational capacity, such as those which teach about attachment theory which may provide a framework for understanding relationship difficulties. It is also suggested that sending organisations engage external mediators when conflict arises in mission teams to reduce the prospect of conflict-related psychological harm (Cousineau et al., 2010; Strand et al., 2015).

6.2.1.3 Stress management training

It is well documented that being on the mission field is a stressful calling that has a cumulative effect on the body's arousal system, negatively impacting relationships, leading to burnout and possibly mental health reactions that may result in the need to leave the field (Carter, 1999; Irvine et al., 2006; McEwan, 1998; Schwandt & Moriaty, 2008). It is recommended that sending organisations provide training that addresses stress management, including how to recognise risk factors, as well as self-care resources, and importantly, the allocation of time and opportunity to pursue them (Rizkalla & Segal, 2019).

6.2.1.4 Spiritual formation opportunities during training

Some participants expressed a desire that their training had included helpful spiritual practices and resources which could have strengthened their reliance on God during testing times. The concept of spiritual formation, raised in the interviews, is discussed by Australians Evelyn and Richard Hibbert (2016) in their text for training missionaries. They suggest that the development of spiritual practices as part of spiritual formation is necessary for effective missionary service. In their findings, Lewis Hall et al. (2006) proposed that there is a positive relationship between spiritual development and psychological functioning. The development of spiritual maturity impacts psychological stability, possibly having an interdependent relationship with each other. Accordingly, it is recommended that missionary training

address spiritual resources for support and nurture, which also involves a spiritual development component to the training. It is possible that the inclusion of faith and personal development programs pre-service for prospective missionaries may allow for the opportunity to explore their relationship with God and others in a non-confrontational, healing, and protective manner (Cadell et al., 2003; O'Donnell & O'Donnell, 2013).

6.2.1.5 Teaching in human and spiritual attachment

It would seem that learning about both human and spiritual attachment may equip the missionary with an understanding that will enable them to improve the quality of relationships and their mental health and coping ability. Attachment theory helps to explain how an individual's thoughts and feelings play out in relational expectations later in life. Having an understanding of how early relational experiences can also impact how an individual understands their relationship with God may also be helpful in the development of a healthy God concept. Those with a secure attachment to God and others will be more likely to see suffering as a transformational experience, which would be consistent with facilitating post-traumatic growth (Ayawickreme & Blackie, 2014). The converse proposition is that those with an insecure attachment to God will more likely attribute suffering to a God who is uninterested or punishing.

6.2.1.6 Teaching a biblical understanding of suffering

It is suggested that training programs explore a biblical understanding of suffering. Although bible college training clearly focuses on theological understanding, all participants exhibited a need for a helpful biblical framework for suffering and pain, both for themselves and in the environment in which they worked. Richardson (2013), in his examination of the future of missions, posited that "Christians can seem to have such trite and simple answers for profound and disturbing questions" (p. 80). While this was not necessarily true of the

participants in this study, the topic of suffering is certainly worthy of examination in pre-service training (Brock et al., 2018; Eriksson et al., 2014; McKay, 2010).

6.2.1.7 Leadership training for staff and field leaders

Vanhuis (2019) noted that conflict with local leaders was among the top ten reasons missionaries left the field. It is recognised that, at times, those in leadership positions are posted into leadership roles because there is no one else to fill a vacant position (Dimos et al., 2015). In some cases, the longest-serving personnel are plummeted into roles for which they do not have the training, skills, and personal attributes to fill the role successfully (Erikson et al., 2009). This may lead to those leaders leaving the field disillusioned and with a sense of failure, and those who have worked under them also leaving the field disenfranchised, hurt and angry, which could be seen in the current study (Dunaetz & Greenham, 2018). It is suggested that all leaders should undergo leadership training, which includes personality assessments to ascertain suitability for such a role. A mentorship program for new leaders and a supervision program for all leaders may be helpful (Hay et al., 2007).

6.2.1.8 Teaching in the intersection of faith and psychology

The interviews revealed a general embarrassment that the participant's faith in God had not been enough for them to negotiate stressful times and that they had failed God in coming home early. Added to the embarrassment was a sense of shame that their faith had not been strong enough to sustain them, and therefore, their mental health had been compromised (Rosamin et al., 2013). This meant that some felt they had to project an image of coping to the rest of the world (Pargament et al., 2003). It was apparent that an internal struggle persisted in some participants, consistent with overtones of mental health breakdown. This struggle was between the need or desire to access psychological assistance and medication on the one hand and, on the other, the conflicting stance of some churches

that psychology and medication were incompatible with biblical teaching, as noted by Hartog and Gow (2005). Accordingly, it is recommended that this struggle be normalised and resolved by sensitive and targeted teaching around the intersection of psychology and theology.

6.2.1.9 Teaching in loss and grief

In recognition of the felt sense of loss and the ensuing grief that was evident in the interviews, it is suggested that preparation for re-entry by the participants, or indeed, any missionaries going onto the field for the first time, includes learning about the process of loss and grief that may be encountered.

6.2.2 Implications for selection of missionaries

This study revealed that while the call to serve in a missional capacity is of great importance to missionaries and the organisations that send them into the field, it may be judicious to consider other factors in accepting mission candidates. The literature suggests that there are times when this call is not tested sufficiently, leading to people who have an existing history with substantial mental health or extreme personality presentations being unwisely accepted for service and or without necessary support (Duffy et al., 2019). There are many recommendations that psychological screening needs to be a prerequisite for selection and admission to service (Barnett et al., 2005; Hay et al., 2007; Stephens, 2018). A debate exists around whether previous experiences of trauma, including childhood trauma, either increase the trauma load and exacerbate reactions during and after traumatic events (Bannano et al., 2007) or if it acts as a buffer and increases resilience (Knight et al., 2000). Accordingly, screening for previous trauma may help sending organisations put in place support so the mental health of missionaries can be maintained while on the field.

6.2.3 Implications for the support of missionaries

6.2.3.1 Clear pathways for support on the field

It was evident that participants in this study would have benefitted from knowing clear pathways for support and contingency plans and protocols for use after a crisis (Camp et al., 2014). This includes whom to contact and by what means contact can be made, especially in emergencies. Some participants spoke of wishing that the field personnel had taken a more proactive stance in assisting them in negotiating the physical and emotional impact of the traumatic events they had encountered, which was also noted by Irvine et al. (2006) as a system failure in sending organisations. They understood that this would require that field personnel also be trained in trauma response protocols which is also supported by the findings in this research. Where multiple agencies are concerned, a protocol for contact must be pre-established.

The work of Curling & Simmons (2010) recommends that organisations who provide humanitarian aid provide an intranet that gives access to databases that include relevant information on negotiating traumatic events, stress self-help resources, webinars on specific topics pertaining to the work, personal blogs, and a database of contacts and where to get help. There are many Apps available for general use which could be linked to assist with depression, anxiety, stress relief, and self-care. An organisation intranet would be a cost-effective way of providing ongoing training and updating of skills by providing both online support and links to access both external and internal support. This means that workers have at their fingertips resources without having to spend time and precious data to find what may be helpful.

6.2.3.2 Clear pathways for support once back home

It is suggested that current research into the development of resilience be taken into account by organisations, with the recommendation that both on the field, as well as in the re-entry process, support for missionaries be extended for as long as it is needed in order to maintain psychological stability (Richardson, 2002; Stamoolis, 2002). It has been found that resilience in the face of difficult circumstances is built by having people around who are able to give support at the most critical times (Selby et al., 2009; Sippel et al., 2015). This supposes that support may come from multiple sources, including spouses, family, friends, colleagues, and community agencies such as sporting clubs, churches, and in the case of missionaries, sending organisations.

6.2.3.3 Clear channels for communication to home staff

There was a prevailing sense from the participants that prayer and the kind offer of support were not enough to ameliorate the effects of what they had been through. Brown (2007) suggests that the information about traumatic events relayed by email to mission leadership may not convey the profound impact of such events, or at times, not be read at all, thus leaving field workers discouraged by the seeming lack of care from their organisation. There is some indication that field support needed to be sufficiently attuned to the ongoing impact of the situations some missionaries faced and therefore needed to be more proactive in following up. There was also some indication that field support personnel assisting the participants in this study were struggling to cope themselves and had already been or were in the process of being recalled. Accordingly, this study recommends that field support workers also have ongoing support as it is necessary to maintain the psychological strength and effectiveness of the whole team.

6.2.3.4 Access to appropriate professional assistance

In order to address the impact of trauma and stress, all participants in the current study accessed professional counselling services both on the field and back in Australia, some of which they sourced themselves. It is suggested that sending organisations provide ongoing access to mental health professionals both on the field and back home (Camp et al., 2014; Hogstrom & Gingrich, 2014; Jones et al., 2006; Rizkalla & Segal, 2019; Rosik, 2003). The increasing availability of internet services, especially ones that are cost-effective, has the potential to make available both psychological support services, as well as spiritual support resources previously unavailable to missionaries in past decades (Regueiro et al., 2016). Given that it is known that the mission field is a continuously stressful place to be, the availability of counselling on a regular basis may avert the build-up of distress, leading to more significant mental health concerns.

While it is usual practice for sending organisations to debrief returning missionaries, Wartenweiler and Eiroa-Orosa (2016) recommend that included in the debriefing is the acknowledgement of significant spiritual struggles and the need to listen and not judge the decisions made or the struggles which have taken place. It is strongly recommended that any debriefing or counselling post-service be carried out by those who know and understand both the Christian worldview of missionaries and the experience of serving on the field (Jensma, 2017; Rosik et al., 2009). One thing evident in this study was the process each participant was in as they attempted to make sense of God's 'call' and the need to finish their mission placement and return to Australia (Wartenweiler & Eiroa-Orosa, 2016). There are many unanswered questions around the plausibility of God's call to service and possibly whether the call was heard accurately in the first place. There is a need for such a struggle to be expressed and sensitively examined in post-service care. This would include providing

services to enable a safe exploration of any losses incurred (Camp et al., 2014; Jacoby et al., 2019; Vallath et al., 2020).

It is recommended that sending organisations and churches have ready access to a database of Christian health care providers experienced in both trauma and the mission field. Thought could be given to appropriate funds to allow for such support, especially for those missionaries who need to raise their own support.

6.2.3.5 Training in debriefing strategies

Most mission organisations offer debriefing for their returned missionaries, and for some, debriefing is also mandated when missionaries are back in Australia on Home Assignment or furlough. A search by the researcher cannot find any debriefing training programs specifically with a mission focus available in Australia. However, there are some in the US and New Zealand which are, to date, only face-to-face and not accessible online. The quality of current debriefing is, therefore, unknown, although it is a necessity. The development of a manual for debriefing missionaries either on home assignment or who have returned to their country of origin is recommended.

6.2.4 Implications for further research

This study has highlighted the need for further research in several areas. The limited pool of research in the area of missionary attrition which investigates the experience of the missionary themselves, indicates the need for further research in this area. The long-lasting impact of both trauma on the missionary, as well as the broad impacts of prematurely leaving the field, warrants further investigation. Future research could extrapolate the main components of trauma training necessary for missionaries to understand and know. Also recommended is comprehensive data collection from all Australian mission training organisations, which examines the provision of pre-service training in the key components

which have arisen in this study: namely, trauma, PTSD, cumulative trauma, grief and loss, vicarious trauma, and secondary traumatic stress, resilience, stress and burnout, attachment to God, spiritual formation, suffering, and post-traumatic growth.

Further follow-up studies examining the general well-being of returned missionaries may add credibility to the attention which could be given to the training of pre-service missionaries in the areas raised in this study. A study into the provision of specific training provided for member care personnel may enhance the suitability and effectiveness of interventions and support provided by personnel and the organisation itself. This could include the design of specific training modules, which include pre-test and post-test studies to ascertain the effectiveness of the program. Longitudinal studies of returned missionaries that examine the pre-service mental health of candidates, compared with post-service mental health, may be helpful for the provision of ongoing support needs. Measuring change in returned missionaries in mental health, physical health, and relationship to God and others may support the innovation of pre-service training programs.

6.2.4.1 Implications for training

It is unclear from this study whether mission sending organisations and training institutions have more recently addressed the issues raised by participant stories. That is, they had no training in recognising the effects of traumatic events and no training in managing the psychological impact of trauma. Further studies in missionary attrition would benefit from investigating current training practices and programs around trauma and its impact, in training colleges.

It is clear from this study that not knowing what to do and how to recognise trauma sequelae after a traumatic event deeply impacted the participants in this study. Further research could therefore investigate current training practices of Australian and international

training institutions. This could include whether teaching trauma-informed assessment and support processes for both missionaries in training, as well as field and home personnel, are part of the training program. As a result of research into training practices around trauma, training modules could be developed as part of filling this need.

6.2.4.2 Treatment and support

Future research could also include an investigation into specific therapeutic treatment protocols that might best fit this discrete population. This would warrant further investigation into the bio-psycho-social-spiritual impact of experiencing trauma on the field, as well as the impact of leaving the field because of those experiences.

Future research could examine member care experiences of missionaries who have experienced traumatic events. This research may initiate the investigation of models of support for missionaries post-trauma or in the absence of such models, develop models of support. As there is some indication that there was resistance to accessing mental health assistance after a traumatic event, a study examining attitudes towards compromised mental health and the use of professional assistance could be helpful. This study could also include the examination of the assumptions and stigma around accessing help in the form of therapy or medication and resistance to such measures, which may be influenced by theological understanding.

A survey of those who provide debriefing for missionaries, which includes what training they have had which is specific to the mission field, is suggested. Surveying missionaries about what debriefing models have been helpful would further inform the development of training programs in this area.

6.2.4.3 Personal preparation

As there is evidence that missionaries continue to suffer the effects of traumatic experiences long-term in the absence of appropriate education, training, and treatment, future studies could include longitudinal studies that track responses to education, training, and treatment post experiencing traumatic events. This could include a comparative study of those who received trauma-focused interventions and those who took advantage of a more spiritually based recovery process.

An interesting study could examine the call to mission. Such research could consider how the call is heard and interpreted and whether there is any connection between the strength of the call and the ability to maintain positive mental health throughout and after traumatic experiences.

6.2.4.4 Organisational issues

The current research indicates a difference in the field experiences of those sent by large Australian sending organisations, smaller international organisations, or a denomination, or in some cases working on the field without affiliation to any group or agency. A comparative study of missionary attrition across all groups may be helpful for those investigating future missionary service.

6.2.4.5 Personal issues

There is much literature that draws attention to the link between childhood adversity and traumatic experiences and the development of resilience as an adult. Future studies of missionary attrition could examine the link between childhood adversity in the lives of missionaries and the formation of resilience in the face of difficulties while on the field. The application of attachment theory (Bowlby, 1997) to the relational capacity of missionaries indicates that some attachment-driven relational styles are counterproductive to

the smooth functioning of a team. An investigation into how the internal working models formed during childhood impact both responses to traumatic situations and the aftermath and behaviours during conflict warrants investigation. Furthermore, this could be extended to those in leadership positions to ascertain suitability for leadership roles.

6.2.4.6 Missionary Children

There is existing literature on the experiences of MKs on the field, some of which are focused on traumatic experiences. However, this research is quite old and, more specifically, focuses on the trauma experiences of MKs in boarding schools. Current research into the effects of trauma on MKs would assist with the future care of MKs. Longitudinal studies of MK's experiences on the field and adjustment post-service are of importance.

6.2.4.7 The development of training programs

The information gained from further research could be formed into a training program in trauma which could be available for training colleges and sending organisations.

6.3 Limitations of this research

There are a number of limitations present in the current study around investigator bias and sampling, as well as the nature of a qualitative research approach that validates the lived experience of a few to inform the future experience of others.

In keeping with the principles of IPA, it is acknowledged that the researcher could not completely bracket personal experience and preconceptions (Smith et al., (2009). It is hoped that the transparency afforded by direct quotes from the interview transcripts provides evidence of the researcher's reflective and reflexive approach to the findings and discussion. It is important to note that this study has been conducted around Australian missionaries, mission sending organisations, and training colleges and may only be partially applicable to

the training and sending of missionaries in other countries. While all missionaries had returned from the field recently, some had experienced training over three decades ago. The research parameters required that all participants have returned to Australia in the past five years; however, it was found that at interview time, all participants had returned in the previous year.

The small sample size of the current study may be questioned as not being a credible sample size to generalise findings to the larger missionary population. However, Smith et al. (2009) assert that a small sample size is appropriate for a deeper understanding of a participant's lived experience. Although this study did not aim to generalise the participants' experiences to other cohorts, it became clear from the findings that cautious generalisation was possible.

The sample of returned missionaries was purposeful, and recruitment resulted from an invitation from the researcher, which could be seen as a limitation. All participants were vested in the results as they were interested in improving training and care standards for missionaries due to their experiences. This could be seen as bias in the participant population, who may have shaped the discussion into specific agendas.

There are several missionary training colleges in Australia, but this study drew data from missionaries who trained at a limited number of those colleges. It is possible that an investigation into returning missionaries from all Australian colleges may more broadly inform current practices.

The data for this study was produced through a semi-structured interview with questions proposed before the interview and many avenues of inquiry based on how questions were answered. This could be a limitation as the question stems were different for different participants based on the answers which were given to the first question. In pursuing one line of inquiry, different responses were elicited, which may have generated a wide range

of interpretations. As is common in research conducted by inexperienced researchers, the questioning technique was refined in later interviews, as well as a recognition that after the first interviews, certain perspectives and themes were followed through more actively in later interviews.

6.4 Conclusion

The most comprehensive study of missionary attrition was carried out by REMAP II (2007), where it was found that 46% of all missionaries return from the field before ten years of service. Some larger American mission organisations acknowledge that the attrition rate is higher than the addition of new missionaries to the field, so it is feasible to contend that aspects of the lived experience of those on the mission field are problematic. It is also acknowledged that many thousands of missionaries have quietly returned from the field earlier than expected, with no investigation as to why they returned and what the bio-psycho-social-spiritual impact may have been.

Over the last three decades, numerous researchers have indicated that quantitative research, surveys, and anecdotal stories provide evidence that the mission field is a dangerous place to be, and missionaries, as a group, experience traumatic events in numbers far greater than the Western population. While a considerable body of knowledge links trauma to psychological disturbances for aid workers who are often engaged in the same work as missionaries, there is, to date, no literature of the same nature investigating the effect of trauma on missionaries and whether it may lead to attrition. Given that there is no existing qualitative research into the link between trauma, mental health, and attrition in missionaries, this study provides a significant resource to begin engagement with this topic with mission sending organisations, training colleges, and missionaries themselves.

This study of the lived experiences of missionaries who have returned early from the field because of traumatic experiences is the first published qualitative study of its kind. This in-depth study found that missionaries face many circumstances that produce a trauma reaction. Moreover, at any one time, a missionary may be dealing with multiple traumatic events, vicarious trauma, toxic relationships, secondary traumatic stress, as well as loss and grief, the allostatic load of which significantly impacts daily functioning. The participant stories in this study establish a direct link between their experience of traumatic events on the mission field and their subsequent return to Australia prior to any anticipated return date. The study also established a link between their experience of trauma and the breakdown of mental health occasioning assistance in the form of counselling. Participants also confirmed that the experience of toxic relationships in mission teams meets the criterion for a diagnosis of PTSD and can also result in compromised mental health leading to placement breakdown. The results of this study are consistent with those studies which examined the effect of trauma on aid workers.

Ultimately this study has shown that there is much room for future research that may impact the complex nature of missionary service with the aim of reducing the effects of trauma and attrition on many. It has also been demonstrated that training for the mission field will likely benefit from teaching the current understanding of the bio-psycho-social-spiritual effects of trauma on people. It is hoped by the researcher and the participants in this study that research such as the current study impacts the training and care of the missionaries and reduces the premature loss of missionaries to the field. The seriousness of the impacts of serving on the mission field cannot be underestimated. These impacts call for the church to rethink what mission is and the validity of sending its own into war zones and crisis areas. Global Christianity has experienced a radical shift in recent years, with half to two-thirds of all Christians living in the Global South and Eastern Countries, with over 100 million

Christians estimated in China alone. Indeed, countries such as Brazil, China, and Korea are sending missionaries to the secularised countries of Europe and Australia. It is estimated that the church in the west decreases by 4,300 people a day (Sanneh, 2003), where the church is being infiltrated by consumerism and individuality. Glanville and Glanville (2021) propose a new way of thinking about mission as the 21st Century sees an influx of refugees into first-world countries. Perhaps the mission field is in our own neighbourhoods as we reach out to those exploited and devastated by military regimes and poverty and displaced from their homelands, seeking asylum in western countries. Such a prospect renders the need for understanding and responding to trauma even more critical.

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Appendices

Appendix 1: HREC Approval

Appendix 2: Invitation to Participate

Appendix 3: Client Information Form

Appendix 4: Client Consent Form

Appendix 5: Demographics Information Sheet

Appendix 6: Interview Questions

Appendix 7: NVivo Coding Example

Appendix 1: HREC Approval



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30 March 2016

Dr Ebinepre Cocodia & Ms Julie Nixon
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Dear Ebi and Julie,

Reference Number: 016007S

Project title: "Challenges on the mission field: Exploring the experience and impact of overwhelming events on Christian missionaries."

Your response to the conditions imposed by the university's Human Research Ethics Committee, has been reviewed and assessed as meeting all the requirements as outlined in the *National Statement on Ethical Conduct in Human Research (2014)*. I am pleased to advise that ethical clearance has been granted for this proposed study.

All research projects are approved subject to standard conditions of approval. Please read the attached document for details of these conditions.

On behalf of the Human Research Ethics Committee, I wish you well with your study.

Yours sincerely,



Dr Natalie Giles
Research Ethics Officer
Research Office

cc: Dr Jane Stenning, Acting Dean, School of Arts & Sciences Sydney,
Dr Christine de Matos, SRC Chair, School of Arts & Sciences Sydney.

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Appendix 2: Letter of Invitation

Letter of invitation to participate in a research project.

Research Project title:

Challenges on the mission field: Exploring the experience and impact of overwhelming events on Christian missionaries

My name is Julie Nixon and I am a PhD candidate at The University of Notre Dame Australia, Sydney. Reference number 016007S.

I am conducting research into the reasons why some missionaries return from their postings earlier than expected. It is hoped that this research project will inform missionary training practices and member care while on the field, and on return to the sending country.

The project will involve:

- One semi structured one-on-one interview of about 2-3 hours duration, with the investigator, Julie Nixon
- audio taping of the interview, which will be subsequently transcribed by a third party transcriber under a confidentiality agreement.
- questions which will focus around the participant's experience/s while on the mission field, the decision making process prior to returning home and the impact of experiences on the field and the care given to the participant during, and post placement
- meeting in a place which is a mutually convenient location

The content of all interviews would be completely de-identified for the participant, their sending agency, the country of service and any other identifying information that might compromise safety or integrity. Involvement in the interviews would be completely voluntary.

In order to meet the criterion for this study you would need to:

- have served overseas for at least one year
- have returned to Australia earlier than expected, within the last 5 years
- be aged between 25-75
- be a Christian

If you would like to participate in this research project or have any questions about this project please feel free to contact either myself [REDACTED]; julie.nixon1@my.nd.edu.au or my supervisors, Dr Ebinepre Cocodia, [REDACTED]; ebinepre.cocodia@nd.edu.au] or Linda MacKay [REDACTED]; linda.mackay@nd.edu.au]. My supervisors and I are happy to discuss with you any questions you may have about this study.

Yours sincerely,

Julie Nixon

Appendix 3: Participant Information Sheet

PARTICIPANT INFORMATION SHEET

Research Project:

Challenges on the mission field: Exploring the experience and impact of overwhelming events on Christian missionaries

Dear

You are invited to participate in the research project described below.

What is the project about?

The research project investigates missionaries' experiences while serving in countries that are, in particular, experiencing war, terrorism, persecution of Christians and or the effects of natural disasters. These events place undue stress and expectations on those serving on the mission field. It is hoped that this research project will inform missionary training practices and member care while on the field, and on return to the sending country.

Who is undertaking the project?

This project is being conducted by Julie Nixon and will form the basis for the degree of Doctor of Philosophy at The University of Notre Dame Australia, under the supervision of Dr Ebinepre Cocodia, Dr Linda MacKay, Dr Marie-Therese Proctor and Dr Maureen Miner Bridges.

What will I be asked to do?

If you consent to take part in this research study, it is important that you understand the purpose of the study and the tasks you will be asked to complete. Please make sure that you ask any questions you may have, and that all your questions have been answered to your satisfaction, before you agree to participate.

The project will involve:

- one semi structured one-on-one interview of about 2- 3 hours duration, with the investigator, Julie Nixon
- audio taping of the interview which will be subsequently transcribed by a third party under a confidentiality agreement
- questions which will focus on the participant's experience/s while on the mission field, the impact of those experiences and the care given to the participant during and post placement
- meeting in a place that is a mutually convenient location

Are there any risks associated with participating in this project?

It is possible that you may experience some level of anxiety or stress during the session as a result of some of the questions you will be asked. You will be monitored closely during the interview and you are free to withdraw at any time during the session. If these feelings persist after the completion of the session, arrangements will be made for you to access support from a mutually arranged counsellor/support person at no expense to you. At the outset support can be found by calling Lifeline 13 11 14 or Beyondblue counselling service 1300 22 4636. The researcher will provide a follow up phone call to allow for debriefing within a day or two of the interview.

What are the benefits of the research project?

Research tells us that reflecting on important life experiences helps facilitate personal growth and that having a witness to such experiences is validating and affirming. Should you decide to participate it is hoped that this will be an opportunity to provide insight into your experiences which also may provide significant information for others. In the event that the interview evokes distressing memories the process will give opportunity for you to access counselling for up to 10 sessions in order to further resolve the difficult experiences.

For the missionary community and sending agencies it is hoped that this study will provide further insight into how to prepare and support those planning to go into the mission field. Furthermore, it is envisioned that this study will inform training practices pre-posting, and result in well informed, rigorous care practices during and on return from the mission field.

What if I change my mind?

Participation in this study is completely voluntary. Even if you agree to participate you can withdraw from the study during the interview or after the interview without discrimination or prejudice. If you withdraw, all information you have provided will be destroyed.

It will be possible for you to withdraw from the study up until the final results are presented for examination.

Will anyone else know the results of the project?

Information gathered about you will be held in strict confidence. This confidence will only be broken if required by law. Only the researcher will have access to the information prior to de-identification. In published documents the participant, country or region of service (broad areas such as Middle East, Central Asia may be identified), sending organisation/s and any other identifiable information that may compromise safety and integrity will be kept secure.

Information will be stored on a password protected university based computer. Hard copy documents will be stored in a locked filing cabinet

Once the study is completed, the data collected from you will be de-identified and stored securely in the School of Arts and Sciences at The University of Notre Dame Australia for at least a period of five years. The data may be used in future research by the researcher only, but you will not be able to be identified. The results of the study will be published as a thesis.

Will I be able to find out the results of the project?

Once the research is completed a one page summary of the results will be provided to you. Copies of any published papers can be provided to you on request.

Who do I contact if I have questions about the project?

If you have any questions about this project please feel free to contact either myself [REDACTED]; [REDACTED]; julie.nixon1@my.nd.edu.au) or my supervisors, Dr Ebinepre Cocodia, [REDACTED]; ebinepre.cocodia@nd.edu.au] or Dr Linda Mackay [REDACTED]; linda.mackay@nd.edu.au. My primary supervisors and I are happy to discuss with you any concerns you may have about this study.

What if I have a concern or complaint?

The study has been approved by the Human Research Ethics Committee at The University of Notre Dame Australia (approval number 016007S). If you have a concern or complaint regarding the ethical conduct of this research project and would like to speak to an independent person, please contact Notre Dame's Ethics Officer at (+61 8) 9433 0943 or research@nd.edu.au. Any complaint or concern will be treated in confidence and fully investigated. You will be informed of the outcome.

How do I sign up to participate?

If you are happy to participate, please contact Julie Nixon on at which time a mutually suitable interview will be arranged. At that time you will be provided with an opportunity to ask further question (if applicable) and will be asked to complete and sign a written consent form.

Thank you for your time. This sheet is for you to keep.

Yours sincerely,

Julie Nixon

Appendix 4: Consent Form

CONSENT FORM

Research Project title: Challenges on the mission field: Exploring the experience and impact of overwhelming events on Christian missionaries

- I agree to take part in this research project.
- I have read the Information Sheet provided and been given a full explanation of the purpose of this research project and what is involved in the interview(s).
- I understand that I will be interviewed and that the interview will be audio- recorded, and subsequently transcribed by a third party transcriber under a confidentiality agreement.
- The researcher has answered all my questions and has explained possible risks that may arise as a result of the interview and how these risks will be managed.
- I understand that I do not have to answer specific questions if do not want to and may withdraw from participating in the project at any time without prejudice.
- I understand that all information provided by me is treated as confidential and will not be released by the researcher to a third party unless required to do so by law.
- I agree that any research data gathered for the study may be published provided my name or other identifying information is not disclosed.

- I understand that research data gathered may be used for future research but my name and other identifying information will be removed.

Name of participant			
Signature of participant		Date	

- I confirm that I have provided the Information Sheet concerning this research project to the above participant, explained what participating involves and have answered all questions asked of me.

Signature of Researcher		Date	
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Appendix 5: Demographic Information Sheet

Demographic Information Sheet

Please complete the information below as accurately as is possible, either by circling the relevant information or writing details in the space provided. Please feel free to use the back of the form if there is insufficient space on the form.

1. Age:

2. Gender (please circle): Male Female

3. Denominational affiliation (please specify, e.g. Catholic, Baptist, etc.):

.....

4. Please describe what has been your primary work as a missionary?

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.....

.....

5. Please list details of all your mission placements in chronological order from your first placement to your most recent placement:

	Sending Organisation/Agency	Year(s) of Placement	Length of Stay (Months)	Placement Location (Country)
1				
2				
3				
4				
5				
6				

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6. For each of the placements listed above please specify the following:

	Type of location of placement (PLEASE TICK RELEVANT OPTION)	Distance to support services (E.g., medical, transport, team members, a church or fellowship) (PLEASE TICK RELEVANT OPTION)	Time taken to access these services (PLEASE TICK RELEVANT OPTION)	People accompanying you on your placement (PLEASE TICK RELEVANT OPTION)
1	Country area <input type="radio"/> Village <input type="radio"/> Town <input type="radio"/> City <input type="radio"/> Capital city <input type="radio"/> Moved around <input type="radio"/>	1-10 kms <input type="radio"/> 10- 20 kms <input type="radio"/> 20-50 kms <input type="radio"/> 50+ kms <input type="radio"/>	Less than 15 minutes <input type="radio"/> Less than an hour <input type="radio"/> 1-2hours <input type="radio"/> Half a day <input type="radio"/> A full day <input type="radio"/> Longer than a day <input type="radio"/>	Working on your own <input type="radio"/> Part of a family working together <input type="radio"/> Part of a team <input type="radio"/>
2	Country area <input type="radio"/> Village <input type="radio"/> Town <input type="radio"/> City <input type="radio"/> Capital city <input type="radio"/> Moved around <input type="radio"/>	1-10 kms <input type="radio"/> 10- 20 kms <input type="radio"/> 20-50 kms <input type="radio"/> 50+ kms <input type="radio"/>	Less than 15 minutes <input type="radio"/> Less than an hour <input type="radio"/> 1-2 hours <input type="radio"/> Half a day <input type="radio"/> A full day <input type="radio"/> Longer than a day <input type="radio"/>	Working on your own <input type="radio"/> Part of a family working together <input type="radio"/> Part of a team <input type="radio"/>
3	Country area <input type="radio"/> Village <input type="radio"/> Town <input type="radio"/> City <input type="radio"/> Capital city <input type="radio"/> Moved around <input type="radio"/>	1-10 kms <input type="radio"/> 10- 20 kms <input type="radio"/> 20-50 kms <input type="radio"/> 50+ kms <input type="radio"/>	Less than 15 minutes <input type="radio"/> Less than an hour <input type="radio"/> 1-2 hours <input type="radio"/> Half a day <input type="radio"/> A full day <input type="radio"/> Longer than a day <input type="radio"/>	Working on your own <input type="radio"/> Part of a family working together <input type="radio"/> Part of a team <input type="radio"/>
4	Country area <input type="radio"/> Village <input type="radio"/> Town <input type="radio"/>	1-10 kms <input type="radio"/> 10- 20 kms <input type="radio"/> 20-50 kms <input type="radio"/>	Less than 15 minutes <input type="radio"/> Less than an hour <input type="radio"/> 1-2 hours <input type="radio"/>	Working on your own <input type="radio"/> Part of a family working together <input type="radio"/>

	City <input type="radio"/> Capital city <input type="radio"/> Moved around <input type="radio"/>	50+ kms <input type="radio"/>	Half a day <input type="radio"/> A full day <input type="radio"/> Longer than a day <input type="radio"/>	Part of a team <input type="radio"/>
5	Country area <input type="radio"/> Village <input type="radio"/> Town <input type="radio"/> City <input type="radio"/> Capital city <input type="radio"/> Moved around <input type="radio"/>	1-10 kms <input type="radio"/> 10- 20 kms <input type="radio"/> 20-50 kms <input type="radio"/> 50+ kms <input type="radio"/>	Less than 15 minutes <input type="radio"/> Less than an hour <input type="radio"/> 1-2 hours <input type="radio"/> Half a day <input type="radio"/> A full day <input type="radio"/> Longer than a day <input type="radio"/>	Working on your own <input type="radio"/> Part of a family working together <input type="radio"/> Part of a team <input type="radio"/>
6	Country area <input type="radio"/> Village <input type="radio"/> Town <input type="radio"/> City <input type="radio"/> Capital city <input type="radio"/> Moved around <input type="radio"/>	1-10 kms <input type="radio"/> 10- 20 kms <input type="radio"/> 20-50 kms <input type="radio"/> 50+ kms <input type="radio"/>	Less than 15 minutes <input type="radio"/> Less than an hour <input type="radio"/> 1-2 hours <input type="radio"/> Half a day <input type="radio"/> A full day <input type="radio"/> Longer than a day <input type="radio"/>	Working on your own <input type="radio"/> Part of a family working together <input type="radio"/> Part of a team <input type="radio"/>

7. Please specify the following:

(i) Total years spent doing mission placements:

(ii) Total years as a Christian:

Appendix 6: Interview questions

Research questions

Thank you for agreeing to participate in this interview today. I hope it will be a good experience for you. I will be asking you some questions about your experience of working on the mission field. There is no right or wrong response to any of the questions I will be asking. I am really interested in learning about what it was like for you personally on the mission field and then when you came back home. The interview will take around two hours and as discussed previously, it will be audio taped. If I ask any question that makes you feel particularly uncomfortable to answer you are under no pressure to do so. You may also stop

the interview at any point and have a break or choose not to continue with it. Can I please reiterate that this interview, once transcribed, will be totally de-identified. I share your concern about maintaining your own privacy and integrity, and also that of your sending agency. I am also very aware that in a country you may have served in, publishing details of that service may also endanger lives or the work in that country. Can I assure you there will be no way in which countries, organisations or people at present serving in those countries will be able to be identified. Can I please have recorded on tape confirmation that I have been through the Consent Form with you and you have agreed to participate by signing the form.

Orientating questions:

1. Can you tell me about what prompted your decision to apply to serve on the mission field?

Possible probe:

What specifically influenced your decision to apply to your sending agency/s?

2. Can you explain what it was like when you arrived at your first placement?

Possible probe:

What things stood out?

3. Can you describe what day-to-day life was like in the mission field?

Possible probe:

What, if any issues or challenges, did you encounter/experience? (for example, anything unexpected, concerning, confusing etc.)?

Focus Questions

(Note: Where interviewees provide information related to trauma experiences these experiences will be explored with relevant probing questions).

1. I understand that you returned from a field placement earlier than expected. Can you indicate which placement this was and what was happening at the time you began to consider leaving that placement?

Possible probes

For example, what specific circumstances prompted you to start thinking about leave early?

2. Can you describe how you finally came to your decision to leave?

Possible probes

- a. What was happening around you during this time?
 - i. emotionally
 - ii. spiritually
 - iii. physically
- b. (If relevant) What was happening in your own family at this time and how did they respond to your suggestion to leave early?
- c. Were you the only person in your area on the field who left around that time? (If no, did their decision to leave in any way influence your decision to leave and how so?)
- d. Was your sending agency involved in the decision making process and if yes, how so?

3. Can you describe any challenges or issues you experienced in implementing your decision to leave and how you managed these?

Possible Probes

- I. Personally
- II. Family-wise
- III. Organisationally (for example, was your sending organisation available to you during this time?)

4. Can you talk about what support you had throughout this time?

Possible probes

- I. Family support on the field or back home?
- II. Sending agency support in the field or back home?

5. Once you returned home, can you describe how your decision to leave early affected you, if in any way at all?

6. In reflecting back on this experience, did your pre-field training prepare you for what it was really like on the field?

Possible probes

- a. What was helpful in preparing you for what you experienced on the field?
- b. What were you totally unprepared for?
- c. In hindsight, what would you have needed before, during and after your placement so that you might have been able to remain on the field?

- d. What would you like to say to sending organisations, if you could, about any aspect of your experience and in particular about the circumstances surrounding your decision to leave the mission field early?

7. In reflecting back over this experience how have these experiences affected you?

Possible probes

- i. emotionally
- ii. spiritually
- iii. physically

Thank you for your time today and for participating in this interview. I hope that what you have shared will have significance for those who continue to serve. I will check in with you in 2 weeks to see how you are doing, however if the need arises my phone number is provided on the Information sheet as well as the numbers for Lifeline and Beyondblue telephone counselling services. Will it be OK for me to call you in 2 weeks?

Appendix 7: Example of NVivo 12 Coding

The screenshot displays the NVivo 12 software interface, specifically the 'Nodes' view. The interface includes a menu bar at the top with options like 'Home', 'Import', 'Create', 'Explore', and 'Share'. Below the menu is a toolbar with various icons for file operations, exploration, and coding. The main area shows a list of nodes, each with a name, a number of references, a 'Created On' date and time, a 'Created By' name, and a 'Modified On' date and time. The nodes are organized into a hierarchical structure, with some nodes expanded to show sub-nodes. The nodes are color-coded with small circles on the right side of the list.

Name	References	Created On	Created By	Modified On	Modified By
1_Events	8	15/10/2019 5:46 PM	JN	24/10/2019 2:14 PM	JN
Team conflict	3	22/10/2019 4:55 PM	JN	24/10/2019 2:09 PM	JN
2_Imapct	4	15/10/2019 5:47 PM	JN	26/10/2019 1:09 PM	JN
On the children	2	26/10/2019 1:41 PM	JN	26/10/2019 1:45 PM	JN
Psychological health	7	15/10/2019 5:49 PM	JN	26/10/2019 1:05 PM	JN
resentment	0	11/11/2019 4:18 PM	JN	11/11/2019 4:18 PM	JN
Spiritual impact	3	26/10/2019 1:06 PM	JN	26/10/2019 1:10 PM	JN
3_decision to leave	7	15/10/2019 5:50 PM	JN	26/10/2019 1:46 PM	JN
back home	5	21/10/2019 4:38 PM	JN	21/10/2019 6:45 PM	JN
Feelings about coming home	7	26/09/2019 9:55 AM	JN	15/10/2019 1:46 PM	JN
4_resources	6	15/10/2019 5:51 PM	JN	26/10/2019 3:35 PM	JN
resilience	0	11/11/2019 4:34 PM	JN	11/11/2019 4:34 PM	JN
Spiritual resources	8	24/10/2019 11:30 AM	JN	26/10/2019 1:08 PM	JN
5_Effective support	6	21/10/2019 12:33 PM	JN	28/10/2019 3:37 PM	JN
Support once back home	2	26/10/2019 1:33 PM	JN	26/10/2019 1:40 PM	JN
what didn't help	4	16/10/2019 6:51 PM	JN	21/10/2019 6:44 PM	JN
What was needed that didn't come	2	9/16/2019 6:51 PM	JN	28/10/2019 3:41 PM	JN
6_Pre Placement Training	6	15/10/2019 5:52 PM	JN	28/10/2019 3:50 PM	JN
Mission specific training pre service	8	3/10/2019 10:19 AM	JN	15/10/2019 1:38 PM	JN
What would have helped	2	4/15/2019 6:20 PM	JN	15/10/2019 6:25 PM	JN
A_The Journey Begins	0	26/10/2019 1:13 PM	JN	26/10/2019 1:13 PM	JN
Organisation	4	11/23/09/2019 12:37 PM	JN	15/10/2019 1:05 PM	JN